

POOR LEGIBILITY

**PORTIONS OF THIS DOCUMENT
MAY BE UNREADABLE, DUE TO
THE QUALITY OF THE
ORIGINAL**



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IV

345 COURTLAND STREET, N.E.
ATLANTA, GEORGIA 30365

#1562

4WD-SISB

Mr. John Taylor
Land Protection Branch
Georgia Environmental Protection Division
205 Butler Street, SW
Atlanta, Georgia 30334

RE: EPA Preliminary Assessment and Screening
Site Investigations for CERCLA sites in Georgia.

Dear Mr. Taylor:

Forwarded for your information are copies of Preliminary Assessments (PAs) and Screening Site Investigations (SSIs) prepared by EPA for CERCLA sites located in the State of Georgia. All preliminary Hazardous Ranking System (HRS) scores and scoring documentation have been removed from the reports.

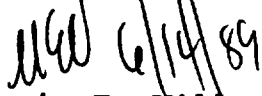
Following is a list of the records being provided:

Koppers Company	GAD075866418	SSI phase I
Pastures Various	GAD980729271	SSI phase I
Smith C.O. Farm/ Ganon Property	GAD980559298	SSI phase I
Ralston Purina Co.	GAD003269883	SSI phase I
Old Sterling Landfill	GAD980496939	SSI phase I
Owens Illinois, Inc. Plant #10	GAD003295243	SSI phase I
Payco Pallet and Drum Site	GAD980710552	SSI phase I
Latex Construction Co.	GAD980803696	SSI phase I

The status of each site is indicated on each report.

Should you have any questions or comments, please contact me at (404) 347-5065.

Sincerely yours,


Mario E. Villamarzo
Georgia Project Officer

cc: Murray Warner

MV:aa:Doc Taylor3:6/8/89:5065

YELLOW



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IV

345 COURTLAND STREET
ATLANTA, GEORGIA 30363

Mr. John Taylor, Chief
Land Protection Branch
Georgia Department of Natural Resources
205 Butler Street, SW
Atlanta, Georgia 30334

RE: Owens-Illinois Plant #10
Atlanta, Georgia
GAD003295243

Payco Pallet and Drum Site
Ellenwood, Georgia
GAD980710552

Dear Mr. Taylor:

This is to inform you that the subject sites have been assigned a NFRAP designation. The reason for this designation is that the Preliminary HRS Score computed for each site was low.

Please be advised that the NFRAP designation is based on information currently available and conditions and policies that currently exist.

It is possible that in the future our investigation of the site may be reactivated if new information or policies warrant such an action.

Sincerely,

Kenneth A. Lucas
Site Manager

cc: Murray Warner, NUS
Mario Villamarzo
KL:aa:NFRAP:5/25/89:5065

KAL 5/25/89

yellow



1927 LAKESIDE PARKWAY
SUITE 614
TUCKER, GEORGIA 30084
404-938-7710

~~CONFIDENTIAL~~
received
MAY 16 1989
SISB/AS
COMPLETE
ENG. _____

C-586-5-9-43

May 15, 1989

Mr. A. R. Hanke
Site Investigation and Support Branch
Waste Management Division
Environmental Protection Agency
345 Courtland Street, N. E.
Atlanta, Georgia 30365

Date: 5/24/89
Site Disposition: UP
EPA Project Manager: K. L. W.

Subject: Screening Site Inspection, Phase I
Owens-Illinois, Inc. Plant #10
Atlanta, Fulton County, Georgia
EPA ID No. GAD003295243
TDD No. F4-8902-39

Dear Mr. Hanke:

FIT 4 was tasked to conduct a Screening Site Inspection at the Owens-Illinois, Inc. Plant #10 located in Atlanta, Fulton County, Georgia. Phase I of the inspection included a study of state and EPA file materials, a target survey and an offsite reconnaissance of the facility and surrounding area.

The facility is located off of I-85, on Sylvan Road near the cities of Hapeville, East Point, and College Park. Operations at the facility began in 1957 and continue at the present time (Ref. 4). Owens-Illinois, Inc. processing consists of mixing sand, soda ash and limestone with colorizers, blending the mixture, melting the mixture and forming glass containers. These glass containers are then annealed, packaged and shipped to consumers (Ref. 5).

Owens-Illinois, Inc. apparently dumped waste, chromium-laden firebrick and checker dust along with solvents in an onsite landfill from 1962 until 1980. The landfill was abandoned in 1980, and wastes were then disposed of at hazardous waste disposal facilities (Refs. 5, 6).

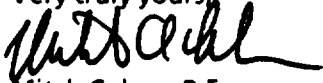
During an offsite reconnaissance, the facility was seen to be completely fenced. Adjacent to the north property line, an established residential neighborhood was observed. Also, an apartment complex is adjacent to the south property line. No private wells were found close to the facility, and it is unlikely that any even exist since complete municipal water distribution is available within the study area (Ref. 2, pp. 3, 4). Municipal water is provided by the city of Atlanta, which draws water from the Chattahoochee River. The river is not influenced by drainage from the study area (Ref. 7).

Surface water runoff enters the South River approximately 2000 feet north of the facility. The South River then flows east-southeast approximately 50 miles until it enters Jackson Lake in Newton County (Refs. 3, 8). No known surface water intakes are located on the surface water pathway (Refs. 3, 9).

Mr. A. R. Hanke
Environmental Protection Agency
TDD No. F4-8902-39
May 15, 1989 - page two

Because there are few targets and no sensitive environments or food chain concerns within the study area, FIT 4 recommends that no further remedial action be planned at the Owens-Illinois, Inc. facility. If you have any questions regarding this site, please feel free to contact me.

Very truly yours,

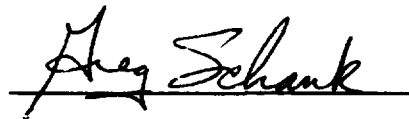

Mitch Cohen, P.E.
Project Manager

MC/kw

Enclosures

cc: Ken Lucas

Approved:



Surface Water Pathway

Are there intakes located on the extended 15-mile migration pathway? There are no surface water intakes located on the extended pathway (~~Ref~~ Ref. 9)

Are there recreational areas, sensitive environments, or human food chain targets (fisheries) along the extended pathway? The South River is ^{apparently} used recreationally for boating and fishing along the extended pathway.

Onsite Exposure Pathway

Is there waste or contaminated soil onsite at 2 feet below land surface or higher? N/A

Is the site accessible to non-employees (workers do not count)? No, the property is fenced

Are there residences, schools, or daycare centers onsite or in close proximity? There are houses and Keller Apartments located within 0.25 miles of the facility

Are there barriers to travel (e.g., a river) within one mile? Yes, the South River is within one mile to the north.

REFERENCES

1. Thomas W. Yasinski, Corporate Agent, Owens-Illinois Plastic Products, Inc., letter to the Georgia Department of Natural Resources, May 12, 1987. Subject: Change of ownership notification from OI Blown Container Sts. Inc.
2. NUS Corporation Field Logbook No. F4-1295 for Owens-Illinois, Inc., TDD No. F4-8902-39. Documentation of facility reconnaissance, March 30, 1989.
3. U.S. Geological Survey, 7.5 minute series Topographic Quadrangle Maps of Georgia: Jonesboro 1954 (Photorevised 1983), Southeast Atlanta 1954 (Photorevised 1983), Redan 1956 (Photorevised 1983), Stockbridge 1964 (Photorevised 1982), scale 1:24,000.
4. Waste Management Data Sheet, Georgia Department of Natural Resources, Environmental Protection Division. Filed by G. C. Manus, Owens-Illinois, purchasing manager, January 25, 1984.
5. Trip Report, Georgia Department of Natural Resources, Environmental Protection Division. Filed by Terrell Rooks, Environmental Scientist, March 14, 1984.
6. Potential Hazardous Waste Site Identification and Preliminary Assessment (EPA Form 2070-2) and attachments. Filed by Jim Ussery, Georgia Environmental Protection Division, September 14, 1982.
7. Georgia Department of Natural Resources, Environmental Protection Division, "Water Availability and Use - Chattahoochee River Basin," (Georgia: Georgia Department of Natural Resources, 1984).
8. State of Georgia Map, U.S. Department of the Interior, Geological Survey, 1970, scale: 1:500,000.
9. Georgia Department of Natural Resources, Environmental Protection Division, "Water Availability and Use - Flint River Basin," (Georgia: Georgia Department of Natural Resources, 1984).

RECONNAISSANCE CHECKLIST FOR HRS2 CONCERNS

Instructions: Obtain as much "up front" information as possible prior to conducting fieldwork. Complete the form in as much detail as you can, providing attachments as necessary. Cite the source for all information obtained.

Site name: Owens- Illinois Inc., Plant #10

City, County, State: Atlanta, Fulton, GA

EPA ID No.: GA0003295243

Person responsible for form: Mitch Cohen

Date: Mar. 30, 1999

Air Pathway

Describe any potential air emission sources onsite: N/A

Identify any sensitive environments within 4 miles: N/A

Identify the maximally exposed individual (nearest residence or regularly occupied building - workers do count): The maximally exposed individual(s) would be those that reside in the Keller Apartments adjacent to the south (Ref. 2)

Groundwater Pathway

Identify any areas of karst terrain: N/A

Identify additional population due to consideration of wells completed in overlying aquifers to the AOC: N/A

Do significant targets exist between 3 and 4 miles from the site? There are no significant targets between the 3- and 4-mile radii (information from water departments in Henry, Clayton, Fulton and DeKalb Counties)

Is the AOC a sole source aquifer according to Safe Drinking Water Act? (i.e. is the site located in Dade, Broward, Volusia, Putnam, or Flagler County, Florida) No

OWENS-ILLINOIS
Plastic Products
Division

*File: Owens
Illinois Plastic
Products*

Handwritten signature and initials



May 12, 1987

Ref. 1

RECEIVED

MAY 14 1987

AIR PROTECTION BRANCH

Georgia Department of Natural Resources
205 Butler Street SE
Floyd Towers East
Atlanta, GA 30334

RE: OI Blown Container Sts Inc.
3490 Hamilton Blvd. SW
Atlanta, GA 30354
I.D. No. GAD981219835
Change of Owner

Dear Sir:

Over the past several weeks beginning on March 17, 1987, Owens-Illinois, Inc. has been reorganized as a private company, and restructured as separate corporations along business unit lines with the above referenced permit being transferred to and assumed by OI Blown Container Sts Inc. This name is rather cumbersome to use in day-to-day business communications, and as a matter of convenience in communication with customers, suppliers, regulatory agencies, etc., we have legally changed our name to Owens-Illinois Plastic Products Inc.

Thus, the name Owens-Illinois Plastic Products Inc will be the name appearing on all contracts, licenses, and correspondence relating to the operations of this business after April 15, 1987. Operations and management will continue as in the past. Owens-Illinois Plastic Products Inc. will continue to comply with the terms and conditions of the permits as in the past.

This completes the reorganization process. Thank you for your cooperation and assistance.

Very truly yours,

Owens-Illinois Plastic Products Inc.

Thomas W. Yasinski

Thomas W. Yasinski
(404-766-9613)

jh

0 (2) Ref. 2

Rite in the Rain
WEATHERPROOF



LEVEL

NOTEBOOK NO. 817

ET-1295

Dwain Illinois Inc

Atlanta Fulton County

Mr. Peter Cohen, P.E. - Projects Manager

TDD No. F4-9202-35

LOGBOOK REQUIREMENTS
REVISED - NOVEMBER 29, 1988

NOTE: ALL LANGUAGE SHOULD BE FACTUAL AND OBJECTIVE

1. Record on front cover of the Logbook: TDD No., Site Name, Site Location, Project Manager
2. All entries are made using ink. Draw a single line through errors. Initial and date corrections.
3. Statement of Work Plan, Study Plan, and Safety Plan discussion and distribution to field team with team member signatures.
5. Sign and date each page. Project Manager is to review and sign off on each logbook daily.
6. Document all calibration and pre-operational checks of equipment. Provide serial numbers of equipment used onsite.
7. Provide reference to Sampling Field Sheets for detailed sampling information.
8. Describe sampling locations in detail and document all changes from project planning documents.
9. Provide a site sketch with sample locations and photo locations.
10. Maintain photo log by completing the stamped information at the end of the logbook.
11. If no site representative is on hand to accept the receipt for samples an entry to that effect must be placed in the logbook.
12. Record I.D. numbers of COC and receipt for sample forms used. Also record numbers of destroyed documents.
13. Complete SMO information in the space provided.

All entries in this book will
be made by Mitchell Cohen

Each page will be signed and
dated; and any and all corrections
will be properly initialed

Signature - *[Signature]*
initials - MC

The project manager is Mitchell Cohen

We, the undersigned, have read the
work plan and understand the scope
of this study

[Signature]
Mitchell A. Cohen

[Signature]
Leslie Meador

LOGBOOK REQUIREMENTS
REVISED - NOVEMBER 29, 1988

NOTE: ALL LANGUAGE SHOULD BE FACTUAL AND OBJECTIVE

1. Record on front cover of the Logbook: TOD No., Site Name, Site Location, Project Manager
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Signature - *[Signature]*
initials - MC

The project manager is Mitchell Cohen

We, the undersigned, have read the work plan and understand the scope of this study

[Signature]
Mitchell A. Cohen

[Signature]
Leslie Meador

3/30/80

partly sunny

9:00

warm

We arrived at the facility
 located off of Sylvan Road.
 A group of driving a couple of
 times, we pulled across the
 street into a taxi restaurant
 place and took pictures.

The facility is completely fenced,
 with a wooded area bordering
 to the north. Adjacent to the north
 fence line is a residential
 neighborhood. We drove through and
 found no private wells.

adjacent to the south fence line
 is the Keller Apartments complex. We
 talked with the manager. She
 told us that all 65
 residents were on municipal water
 provided by the city of Hopouille.

Keller & Co.

3/30/89 partly sunny 10:30
warm

these apartments are the closest residential structures to the plant.

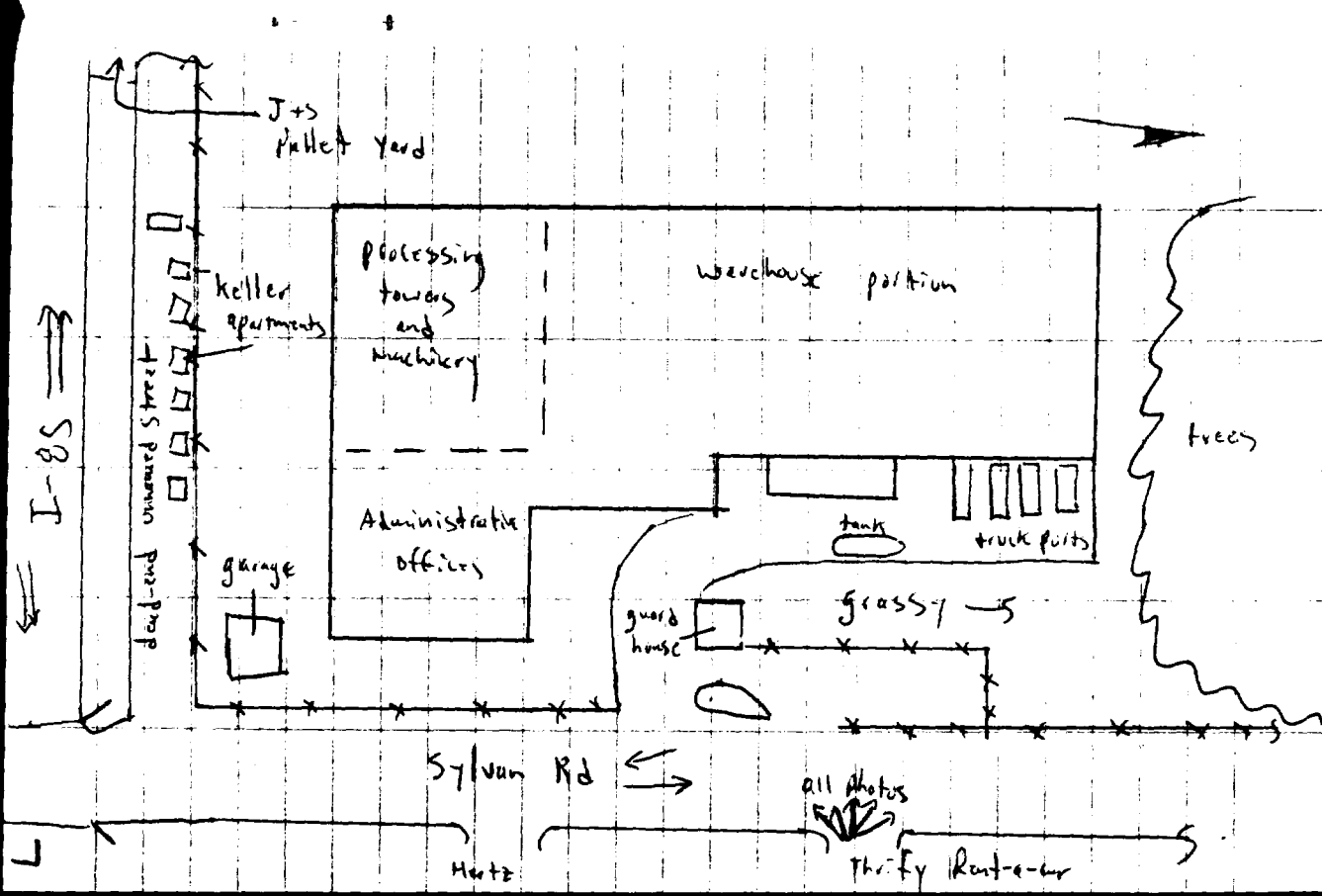
Nearby businesses include those found directly across the street, east of the facility:

Scottish Inn Hotel
Hertz Rent-a-car
Thrifty Rent-a-car
Enterprise Rent-a-car

An Atlanta Citizens Federal Credit Union building was seen inside the property fence ~~between~~ in the north part of the facility.

The complex covers approximately 50 acres, with approximately 14 acres utilized for manufacturing, and administrative offices

Clifford A. Bell



Date 3/30/89 By Whom Mitch Cohen

Time 9:00 # keyed to map: 1

Location Owens - Illinois plant 10

Picture of southern-most portion of facility - note guard house
match with photo 2

Date 3/30/89 By Whom Mitch Cohen

Time 9:00 # keyed to map: 2

Location Owens - Illinois plant 10

Picture of south portion of facility
match with photo 1

Date 3/30/89 By Whom Mitch Cohen

Time 9:00 # keyed to map: 3

Location Owens - Illinois plant 10

Picture of center portion of facility
match with photo 2 & 4

Date 3/30/89 By Whom Mitch Cohen

Time 9:00 # keyed to map: 4

Location Owens - Illinois plant 10

Picture of north portion of facility
match with photo 3 & 5

Date 3/30/89 By Whom Mitch Cohen

Time 9:00 # keyed to map: 5

Location Owens - Illinois plant 10

Picture of northmost portion of facility
match with photo 4

Date _____ By Whom _____

Time _____ # keyed to map: _____

Location _____

Picture of _____

RECONNAISSANCE CHECKLIST FOR HRS2 CONCERNS

Instructions: Obtain as much "up front" information as possible prior to conducting fieldwork. Complete the form in as much detail as you can, providing attachments as necessary. Cite the source for all information obtained.

Site name: Owens-Illinois Inc., Plant #10

City, County, State: Atlanta, Fulton, GA

EPA ID No.: GA0003295243

Person responsible for form: Mitch Cohen

Date: Mar. 30, 1999

Air Pathway

Describe any potential air emission sources onsite: N/A

Identify any sensitive environments within 4 miles: N/A

Identify the maximally exposed individual (nearest residence or regularly occupied building - workers do count): The maximally exposed individual(s) would be those that reside in the Keller Apartments adjacent to the south (Ref. 2)

Groundwater Pathway

Identify any areas of karst terrain: N/A

Identify additional population due to consideration of wells completed in overlying aquifers to the AOC: N/A

Do significant targets exist between 3 and 4 miles from the site? There are no significant targets between the 3- and 4-mile radii (information from water departments in Henry, Clayton, Fulton and DeKalb counties)

Is the AOC a sole source aquifer according to Safe Drinking Water Act? (i.e. is the site located in Dade, Broward, Volusia, Putnam, or Flager County, Florida) NO

Surface Water Pathway

Are there intakes located on the extended 15-mile migration pathway? There are no surface water intakes located on the extended pathway (~~Ref.~~ Ref. 9)

Are there recreational areas, sensitive environments, or human food chain targets (fisheries) along the extended pathway? The South River is ^{apparently} used recreationally for boating and fishing along the extended pathway.

Onsite Exposure Pathway

Is there waste or contaminated soil onsite at 2 feet below land surface or higher? N/A

Is the site accessible to non-employees (workers do not count)? No, the property is fenced

Are there residences, schools, or daycare centers onsite or in close proximity? There are houses and Keller Apartments located within 0.25 miles of the facility

Are there barriers to travel (e.g., a river) within one mile? Yes, the South River is within one mile to the north.

OVERSIZED

DOCUMENT

MAP

Ref. 4

DEPARTMENT OF NATURAL RESOURCES
ENVIRONMENTAL PROTECTION DIVISION
WASTE MANAGEMENT DATA SHEET

NAME AND LOCATION OF FACILITY

OWENS-ILLINOIS INC
3107 SYLVAN ROAD
ATLANTA, GA 30354

PERSON TO CONTACT

(ENTER THE NAME, ADDRESS, TITLE AND BUSINESS TELEPHONE NUMBER OF THE PERSON TO CONTACT REGARDING INFORMATION SUBMITTED ON THIS FORM).

G. C. MANUS - PURCHASING MGR. - 404-765-8634
3107 SYLVAN RD
ATLANTA, GA 30354

DATES OF WASTE HANDLING

(ENTER THE YEARS THAT YOU ESTIMATE WASTE TREATMENT, STORAGE OR DISPOSAL only BEGAN AND ENDED AT THE SITE. IF YOU SELECTED A FACILITY OFF-SITE PLEASE NOTE AND EXPLAIN IN "COMMENTS" SECTION.

1962-1980 ON SITE
1957-PRESENT JONES/ROLLING HILLS LANDFILL, SULLIVAN RD, COLLEGE PARK, GA.
1957-1980 FULTON COUNTY LAND FILL, MERK ROAD, ATLANTA, GA.

GENERAL TYPE OF WASTE

- | | |
|---------------------|------------------------------|
| 1- () ORGANICS | 7- () BASES |
| 2- (X) INORGANICS | 8- () PCB's |
| 3- (X) SOLVENTS | 9- () MIXED MUNICIPAL WASTE |
| 4- () PESTICIDES | 10- () UNKNOWN |
| 5- () HEAVY METALS | 11- () OTHER (SPECIFY) |
| 6- () ACIDS | |

WASTE QUANTITY (ESTIMATED)

11000 CU FT OR LESS.

HAS THERE EVER BEEN A SPILL OR DISCHARGE OF A HAZARDOUS SUBSTANCE FROM YOUR FACILITY? (BRIEFLY EXPLAIN THE NATURE OF THE RELEASE).

MINOR SPILL OF 3-5 GALS. OF TRICHLOROETHANE 1,1,1 WAS
CONTAINED AND PROPERLY DISPOSED OF 2-1-82.

COMMENTS

(IF THERE IS ANY COMMENTS THAT YOU BELIEVE WOULD CLARIFY THE PAST WASTE HANDLING PRACTICES OF YOUR FACILITY OR OF FACILITIES YOU SELECTED TO HANDLE YOUR WASTE, PLEASE ELABORATE IN THE SPACE PROVIDED).

SINCE 1980 ALL HAZARDOUS WASTE HAS BEEN HANDLED
THROUGH PROPER DISPOSAL FACILITIES.

SIGNATURE AND TITLE

NAME

TELEPHONE

G.C. Mann 404-765-8634

STREET

3107 SYLVAN ROAD

CITY

STATE

ZIP CODE

ATLANTA, GA 30354

SIGNATURE

DATE

G.C. Mann 1-25-84



JOE D. TANNER
Commissioner

Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

REF. 5

J. LEONARD LEDBETTER
Division Director

TRIP REPORT
March 26, 1984

Site Name and Location: Owens-Illinois, Inc., East Point

Trip By: Terrell Rooks, E.S. III *TUR*

Accompanied By: None

Date of Trip: March 14, 1984

Officials Contacted: Cliff Manus, Bill Anton (404) 765-8634

Reference: Annual Reports, 1981 and 1982

Comments:

1. Sand, soda ash, and limestone are mixed with minor ingredients, including colorizers, at this plant. The mixture is blended, melted, formed into glass containers, annealed, packaged and shipped.
2. Three waste streams were identified. These consist of:
 - a. industrial trash, including broken wood pallets, paper, and batch waste consisting mainly of limestone.
 - b. solvents. Specifically, 1,1,1 trichloroethane has been used in the past for cleaning machine parts. Four drums of F001 waste, accumulation date January 3, 1984, is on hand awaiting pick-up by Chemical Waste Management. Use of an alkaline degreaser has replaced use of the trichloroethane. This degreaser is neutralized on-site in a tank and then discharged to the sanitary sewer.
 - c. checker dust from cleanout of heat exchangers associated with each of three furnaces. This dust is contaminated with chromium, generally at sufficient levels to be hazardous by characteristic, according to Mr. Manus. All of this checker dust is treated as a hazardous waste. Each heat exchanger is cleaned every 4 to 5 years. Thus, one of the three will be undergoing cleaning every year or two. Chrome containing bricks from the heat exchangers are also replaced at these times. The bricks are shipped on a standard bill of lading to Universal Material Incorporated in Mogadore, Ohio, for recycling.
3. The following violations of Generator Standards were noted:
 - a. Part 262.34 (265.173(a)). One drum of checker dust waste was found to be open.
 - b. Part 262.34(a)(2) and (3). Three drums of checker dust waste were not labeled "Hazardous Waste" and did not have the date upon which the period of accumulation begins clearly marked.

March 26, 1984

- c. Part 262.34 (256.52). The contingency plan does not meet requirements. Specifically, the plan does not include facility personnel action responses; does not list the addresses of emergency coordinators; does not list emergency equipment at the facility, including location, physical description, and capabilities; and does not include an evacuation plan for facility personnel.
- d. Part 262.34 (265.54). The plan does not provide that the emergency coordinator has the authority to commit the resources needed to carry out the contingency plan.
- e. Part 262.34 (265.16). The facility does not have a personnel training program of classroom instruction or OJT.

Conclusions:

This facility is in violation of Chapter 391-3-11-.08, Standards Applicable to Generators of Hazardous Waste.

Recommendations and Follow-Up Required:

Notice of Violation and follow-up inspection.

Photographs: None

Reviewed By:

George Merri 3-29-84

Attachments: Generator Standards Inspection Checklist

Ref. 6

JES MEX 12/83



POTENTIAL HAZARDOUS WASTE SITE IDENTIFICATION AND PRELIMINARY ASSESSMENT

SECTION SITE NUMBER (to be assigned by HQ)

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency (EN-335), 401 M St., SW, Washington, DC 20460.

GAD003295243 FULION
OWENS-ILLINOIS, INC/PLANT 10
3107 SYLVAN RD
ATLANTA GA 30354
MANUS, G. C., PURCHASING* 4047662761

SECTION

ET (or other identifier)

E. ZIP CODE COUNTY NAME

2. TELEPHONE NUMBER

H. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☐ 5. PRIVATE ☐ 6. UNKNOWN

"103-C NOTIFICATION" DATE: 810608
JIM SEIZER
PHONE: 404-656-2833

K. DATE IDENTIFIED
(mo., day, & yr.)

2. TELEPHONE NUMBER

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☒ 3. LOW ☐ 4. NONE ☒ 5. UNKNOWN

B. RECOMMENDATION

☐ 1. NO ACTION NEEDED (no hazard)

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

☒ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

b. WILL BE PERFORMED BY:

b. WILL BE PERFORMED BY:

☐ 4. SITE INSPECTION NEEDED (low priority)

C. PREPARER INFORMATION

1. NAME

2. TELEPHONE NUMBER

3. DATE (mo., day, & yr.)

III. SITE INFORMATION

A. SITE STATUS

☐ 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)

☐ 2. INACTIVE (Those sites which no longer receive wastes.)

☐ 3. OTHER (specify):
(Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

B. IS GENERATOR ON SITE?

☐ 1. NO

☐ 2. YES (specify generator's four-digit SIC Code):

C. AREA OF SITE (in acres)

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (deg.-min.-sec.)

2. LONGITUDE (deg.-min.-sec.)

E. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO ☐ 2. YES (specify):



POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION SITE NUMBER (to be assigned by HQ)

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME OWENS - ILLINOIS, INC/PLT 10		B. STREET (or other identifier) 3107 SYLVAN RD	
C. CITY ATLANTA	D. STATE GA.	E. ZIP CODE 30384	F. COUNTY NAME FULTON
G. OWNER/OPERATOR (if known) 1. NAME MANUS, G. C.		2. TELEPHONE NUMBER 404 766-2761	
H. TYPE OF OWNERSHIP <input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input checked="" type="checkbox"/> 5. PRIVATE <input type="checkbox"/> 6. UNKNOWN			

I. SITE DESCRIPTION

LANDFILL

J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)

103 C NOTIFICATION

K. DATE IDENTIFIED
(mo., day, & yr.)

6-8-81

L. PRINCIPAL STATE CONTACT

1. NAME MOSES N. McCALL III	2. TELEPHONE NUMBER 404-656-2833
--------------------------------	-------------------------------------

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☐ 3. LOW ☐ 4. NONE ☒ 5. UNKNOWN

B. RECOMMENDATION

☐ 1. NO ACTION NEEDED (no hazard)

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

☒ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

b. WILL BE PERFORMED BY:

EPD

b. WILL BE PERFORMED BY:

☐ 4. SITE INSPECTION NEEDED (low priority)

C. PREPARER INFORMATION

1. NAME JIM USSERY	2. TELEPHONE NUMBER 404 656-2833	3. DATE (mo., day, & yr.) 7-14-82
-----------------------	-------------------------------------	--------------------------------------

III. SITE INFORMATION

A. SITE STATUS

☐ 1. ACTIVE (These industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)

☒ 2. INACTIVE (These sites which no longer receive wastes.)

☐ 3. OTHER (specify):
(These sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

B. IS GENERATOR ON SITE?

☐ 1. NO

☐ 2. YES (specify generator's four-digit SIC Code):

C. AREA OF SITE (in acres)

UNKNOWN

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (deg.-min.-sec.)

2. LONGITUDE (deg.-min.-sec.)

E. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO

☐ 2. YES (specify):

V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

CHROMIUM

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

NONE

VI. HAZARD DESCRIPTION

	A. TYPE OF HAZARD	B. POTENTIAL HAZARD (mark 'X')	C. ALLEGED INCIDENT (mark 'X')	D. DATE OF INCIDENT (mo., day, yr.)	E. REMARKS
A	1. NO HAZARD				
B	2. HUMAN HEALTH				
C	3. NON-WORKER INJURY/EXPOSURE				
D	4. WORKER INJURY				
E	5. CONTAMINATION OF WATER SUPPLY				
F	6. CONTAMINATION OF FOOD CHAIN				
G	7. CONTAMINATION OF GROUND WATER	X			
H	8. CONTAMINATION OF SURFACE WATER	X			
I	9. DAMAGE TO FLORA/FAUNA				
J	10. FISH KILL				
K	11. CONTAMINATION OF AIR				
L	12. NOTICEABLE ODORS				
M	13. CONTAMINATION OF SOIL	X			
N	14. PROPERTY DAMAGE				
O	15. FIRE OR EXPLOSION				
P	16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS				
Q	17. SEWER, STORM DRAIN PROBLEMS				
R	18. EROSION PROBLEMS				
S	19. INADEQUATE SECURITY				
T	20. INCOMPATIBLE WASTES				
U	21. MIDNIGHT DUMPING				
V	22. OTHER (specify):				



Water Availability & Use

**CHATTAHOOCHEE
RIVER BASIN**

**Georgia Department of Natural Resources
Environmental Protection Division**

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Water Availability & Use Flint River Basin

**Georgia Department of Natural Resources
Environmental Protection Division**

WATER AVAILABILITY AND USE

FLINT RIVER BASIN

GEORGIA

1984



Potential Hazardous Waste Site

Site Inspection Report



Site Inspection Report



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 1 - SITE LOCATION AND INSPECTION INFORMATION

I. IDENTIFICATION
01 STATE 33 SITE NUMBER
GA D003295243

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) Owens-Illinois, Inc. Plant #10	02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 3107 Sylvan Road				
03 CITY Atlanta	04 STATE GA	05 ZIP CODE 30354	06 COUNTY Fulton	07 COUNTY CODE	08 CONG DIST
09 COORDINATES LATITUDE 33 39 30.0 LONGITUDE -84 24 30.0	10 TYPE OF OWNER (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER				

III. INSPECTION INFORMATION

01 DATE OF INSPECTION 3.30.99 MONTH DAY YEAR	02 SITE STATUS <input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> INACTIVE	03 YEARS OF OPERATION 1962 Present BEGINNING YEAR ENDING YEAR	UNKNOWN
04 AGENCY PERFORMING INSPECTION (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <u>Nus Corp.</u> <input type="checkbox"/> C. MUNICIPAL <input type="checkbox"/> D. MUNICIPAL CONTRACTOR <input type="checkbox"/> E. STATE <input type="checkbox"/> F. STATE CONTRACTOR <input type="checkbox"/> G. OTHER			

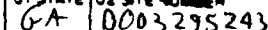
05 CHIEF INSPECTOR Mitch Cohen	06 TITLE Civil Engineer	07 ORGANIZATION Nus Corp	08 TELEPHONE NO (800) 888-7710
09 OTHER INSPECTORS Leslie Meador	10 TITLE Biologist	11 ORGANIZATION Nus Corp	12 TELEPHONE NO (800) 888-7710
			()
			()
			()
			()

13 SITE REPRESENTATIVES INTERVIEWED	14 TITLE	15 ADDRESS	16 TELEPHONE NO ()
			()
			()
			()
			()
			()
			()
			()

17 ACCESS GAINED BY (Check one) <input type="checkbox"/> PERMISSION <input type="checkbox"/> WARRANT	18 TIME OF INSPECTION 9:00	19 WEATHER CONDITIONS Sunny, warm
---	-------------------------------	--------------------------------------

IV. INFORMATION AVAILABLE FROM

01 CONTACT Ken Lucas	02 OF Agency/Department EPA	03 TELEPHONE NO. ()		
04 PERSON RESPONSIBLE FOR SITE INSPECTION FORM Mitch Cohen	05 AGENCY EPA	06 ORGANIZATION Nus Corp	07 TELEPHONE NO. 800-888-7710	08 DATE 5.12.99 MONTH DAY YEAR



- I HIGHLY VOLATILE
- J EXPLOSIVE
- K REACTIVE
- L INCOMPATIBLE
- M NOT APPLICABLE

EPA FORM 2070-13(7-81)



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

1. IDENTIFICATION	
01 STATE	02 SITE NUMBER
GA	D00295245

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A GROUNDWATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ B SURFACE WATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ C CONTAMINATION OF AIR
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ D FIRE/EXPLOSIVE CONDITIONS
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ E DIRECT CONTACT
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ F CONTAMINATION OF SOIL
03 AREA POTENTIALLY AFFECTED: 100
(ACRES)
02 ☐ OBSERVED (DATE: _____) ☒ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

If drums ruptured, contents could be spilled onto grounds. Only workers could be affected

01 ☐ G DRINKING WATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ H WORKER EXPOSURE/INJURY
03 WORKERS POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

See Contamination of Soil

01 ☐ I POPULATION EXPOSURE/INJURY
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
64 0003295243

II. HAZARDOUS CONDITIONS AND INCIDENTS Continued

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION Include number(s) of species

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
Spills, Runoff, Standing Liquids, Leaking Drums
03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

N/A

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

06 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

N/A

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

V. SOURCES OF INFORMATION Give specific references, e.g., field notes, agency reports, records



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION
PART 4 - PERMIT AND DESCRIPTIVE INFORMATION

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA 0003295243

II. PERMIT INFORMATION

01 TYPE OF PERMIT ISSUED (Check all that apply)	02 PERMIT NUMBER	03 DATE ISSUED	04 EXPIRATION DATE	05 COMMENTS
<input type="checkbox"/> A. NPDES				
<input type="checkbox"/> B. UIC				
<input type="checkbox"/> C. AIR				
<input type="checkbox"/> D. RCRA				
<input type="checkbox"/> E. RCRA INTERIM STATUS				
<input type="checkbox"/> F. SPCC PLAN				
<input type="checkbox"/> G. STATE (Specify)				
<input type="checkbox"/> H. LOCAL (Specify)				
<input type="checkbox"/> I. OTHER (Specify)				
<input type="checkbox"/> J. NONE				

III. SITE DESCRIPTION

01 STORAGE/ DISPOSAL (Check all that apply)	02 AMOUNT	03 UNIT OF MEASURE	04 TREATMENT (Check all that apply)	05 OTHER
<input type="checkbox"/> A. SURFACE IMPOUNDMENT			<input type="checkbox"/> A. INCINERATION	<input checked="" type="checkbox"/> A. BUILDINGS ON SITE
<input type="checkbox"/> B. PILES ~440#/drum	11255	Pounds	<input type="checkbox"/> B. UNDERGROUND INJECTION	
<input type="checkbox"/> C. DRUMS, ABOVE GROUND			<input type="checkbox"/> C. CHEMICAL/PHYSICAL	
<input type="checkbox"/> D. TANK, ABOVE GROUND			<input type="checkbox"/> D. BIOLOGICAL	
<input type="checkbox"/> E. TANK, BELOW GROUND			<input type="checkbox"/> E. WASTE OIL PROCESSING	
<input type="checkbox"/> F. LANDFILL	offsite 11000	Ft ³	<input checked="" type="checkbox"/> F. SOLVENT RECOVERY	06 AREA OF SITE ~500 Acres
<input type="checkbox"/> G. LANDFARM			<input type="checkbox"/> G. OTHER RECYCLING/RECOVERY	
<input type="checkbox"/> H. OPEN DUMP			<input type="checkbox"/> H. OTHER (Specify)	
<input type="checkbox"/> I. OTHER (Specify)				

07 COMMENTS: stores spent solvents less than 90 days; No Part A filed

IV. CONTAINMENT

01 CONTAINMENT OF WASTES (Check all that apply)
☒ A. ADEQUATE, SECURE ☐ B. MODERATE ☐ C. INADEQUATE, POOR ☐ D. INSECURE, UNSOUND, DANGEROUS

02 DESCRIPTION OF DRUMS, DRUMS, LINES, BARRIERS, ETC.

Spent solvents and checker dust from heat exchanger cleanout as well as spent firebrick is drummed and shipped to approved facilities.

V. ACCESSIBILITY

01 WASTE EASILY ACCESSIBLE: ☐ YES ☐ NO
02 COMMENTS

VI. SOURCES OF INFORMATION (Cite specific references, e.g., MSDS, RCRA permits, reports)

EPA GA EPD Inspection report 4/5/82



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA

1. IDENTIFICATION
01 STATE GA 02 SITE NUMBER 003295243

II. DRINKING WATER SUPPLY

01 TYPE OF DRINKING SUPPLY
Check as appropriate

	SURFACE	WELL
COMMUNITY	A <input checked="" type="checkbox"/>	B <input type="checkbox"/>
NON-COMMUNITY	C <input type="checkbox"/>	D <input type="checkbox"/>

02 STATUS

ENDANGERED	AFFECTED	MONITORED
A <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>
D <input type="checkbox"/>	E <input type="checkbox"/>	F <input type="checkbox"/>

03 DISTANCE TO SITE

A. > 4 (mi)
B. _____ (mi)

III. GROUNDWATER

01 GROUNDWATER USE IN VICINITY Check one

☐ A ONLY SOURCE FOR DRINKING ☐ B DRINKING
Other sources available
☐ C COMMERCIAL INDUSTRIAL IRRIGATION
Other sources available
☒ D NOT USED, UNUSABLE
Other sources available

02 POPULATION SERVED BY GROUND WATER 0

03 DISTANCE TO NEAREST DRINKING WATER WELL > 4 (mi)

04 DEPTH TO GROUNDWATER
30 (ft)

05 DIRECTION OF GROUNDWATER FLOW

06 DEPTH TO AQUIFER
OF CONCERN
0 (ft)

07 POTENTIAL YIELD
OF AQUIFER
_____ (gpm)

08 SOLE SOURCE AQUIFER
☐ YES ☒ NO

09 DESCRIPTION OF WELLS (including depth, construction, and location relative to production and discharge)

little or no wells located within the 4-mile radius

10 RECHARGE AREA

☒ YES
☐ NO

COMMENTS

11 DISCHARGE AREA

☐ YES
☒ NO

COMMENTS

IV. SURFACE WATER

01 SURFACE WATER USE Check one

☒ A. RESERVOIR, RECREATION
DRINKING WATER SOURCE ☐ B. IRRIGATION, ECONOMICALLY
IMPORTANT RESOURCES ☐ C. COMMERCIAL, INDUSTRIAL ☐ D. NOT CURRENTLY USED

02 AFFECTED/POTENTIALLY AFFECTED BODIES OF WATER

NAME:

South River

AFFECTED

DISTANCE TO SITE

< 0.5 (mi)

☐

☐

☐

(mi)

(mi)

(mi)

V. DEMOGRAPHIC AND PROPERTY INFORMATION

01 TOTAL POPULATION WITHIN

ONE (1) MILE OF SITE
A. 6174
NO. OF PERSONS

TWO (2) MILES OF SITE
B. 18358
NO. OF PERSONS

THREE (3) MILES OF SITE
C. 32354
NO. OF PERSONS

02 DISTANCE TO NEAREST POPULATION

< 0.25 (mi)

03 NUMBER OF BUILDINGS WITHIN TWO (2) MILES OF SITE

> 1000

04 DISTANCE TO NEAREST OFF-SITE BUILDING

< 0.25 (mi)

05 POPULATION WITHIN VICINITY OF SITE (Provide narrative description of nature of population within vicinity of site, e.g., rural village, densely populated urban area)

GEMS Program



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA

1. IDENTIFICATION
01 STATE 02 SITE NUMBER
GA D003295243

VI. ENVIRONMENTAL INFORMATION

01 PERMEABILITY OF UNSATURATED ZONE Check one

☐ A. $10^{-9} - 10^{-8}$ cm/sec ☐ B. $10^{-8} - 10^{-7}$ cm/sec ☒ C. $10^{-7} - 10^{-6}$ cm/sec ☐ D. GREATER THAN 10^{-6} cm/sec

02 PERMEABILITY OF BEDROCK Check one

☒ A. IMPERMEABLE ☐ B. RELATIVELY IMPERMEABLE ☐ C. RELATIVELY PERMEABLE ☐ D. VERY PERMEABLE
Less than 10^{-9} cm/sec $10^{-9} - 10^{-8}$ cm/sec $10^{-8} - 10^{-7}$ cm/sec Greater than 10^{-7} cm/sec

03 DEPTH TO BEDROCK

_____ (ft)

04 DEPTH OF CONTAMINATED SOIL ZONE

< 6 _____ (ft)

05 SOIL pH

06 NET PRECIPITATION

10 _____ (in)

07 ONE YEAR 24 HOUR RAINFALL

3.3 _____ (in)

08 SLOPE

SITE SLOPE

0.1 %

DIRECTION OF SITE SLOPE

north

TERRAIN AVERAGE SLOPE

09 FLOOD POTENTIAL

SITE IS IN _____ YEAR FLOODPLAIN

10

☐ SITE IS ON BARRIER ISLAND, COASTAL HIGH HAZARD AREA, RIVERINE FLOODWAY

11 DISTANCE TO WETLANDS (in feet)

ESTUARINE

A. > 15 (ft)

OTHER

B. > 15 (ft)

12 DISTANCE TO CRITICAL HABITAT (for endangered species)

0 (ft)

ENDANGERED SPECIES: red cockaded woodpecker
bald eagle

13 LAND USE IN VICINITY

DISTANCE TO:

COMMERCIAL/INDUSTRIAL

RESIDENTIAL AREAS; NATIONAL/STATE PARKS;
FORESTS, OR WILDLIFE RESERVES

AGRICULTURAL LANDS
PRIME AG LAND AG LAND

A. < 0.25 (mi)

B. > 15 (mi)

C. < 4 (mi)

D. < 4 (mi)

14 DESCRIPTION OF SITE IN RELATION TO SURROUNDING TOPOGRAPHY

VII. SOURCES OF INFORMATION (cite specific references, e.g., state files, agency reports, reports)

GEMS program



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 6 - SAMPLE AND FIELD INFORMATION

I. IDENTIFICATION	
01 STATE CA	02 SITE NUMBER D003295243

II. SAMPLES TAKEN

SAMPLE TYPE	01 NUMBER OF SAMPLES TAKEN	02 SAMPLES SENT TO N/A	03 ESTIMATED DATE RESULTS AVAILABLE
GROUNDWATER			
SURFACE WATER			
WASTE			
AIR			
RUNOFF			
SPILL			
SOIL			
VEGETATION			
OTHER			

III. FIELD MEASUREMENTS TAKEN

01 TYPE	02 COMMENTS N/A

IV. PHOTOGRAPHS AND MAPS

01 TYPE <input checked="" type="checkbox"/> GROUND <input type="checkbox"/> AERIAL	02 IN CUSTODY OF NWS photo file
03 MAPS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	04 LOCATION OF MAPS NWS file

V. OTHER FIELD DATA COLLECTED (OTHER THAN DATA REPORTED)

N/A

VI. SOURCES OF INFORMATION (CITE SOURCE INFORMATION, E.G., AERIAL PHOTO, GROUND PHOTO, RECORD)

--



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 7 - OWNER INFORMATION

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA D 003 295243

II. CURRENT OWNER(S)

01 NAME Owens-Illinois Plastic Prods. Inc. (1988)
02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, Apt. #, etc.) 3107 Sylvan Rd
04 SIC CODE
05 CITY Atlanta
06 STATE GA
07 ZIP CODE 30354

PARENT COMPANY (if applicable)

08 NAME
09 D+B NUMBER
10 STREET ADDRESS (P.O. Box, Apt. #, etc.)
11 SIC CODE
12 CITY
13 STATE
14 ZIP CODE

01 NAME
02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, Apt. #, etc.)
04 SIC CODE
05 CITY
06 STATE
07 ZIP CODE

08 NAME
09 D+B NUMBER
10 STREET ADDRESS (P.O. Box, Apt. #, etc.)
11 SIC CODE
12 CITY
13 STATE
14 ZIP CODE

01 NAME
02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, Apt. #, etc.)
04 SIC CODE
05 CITY
06 STATE
07 ZIP CODE

08 NAME
09 D+B NUMBER
10 STREET ADDRESS (P.O. Box, Apt. #, etc.)
11 SIC CODE
12 CITY
13 STATE
14 ZIP CODE

01 NAME
02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, Apt. #, etc.)
04 SIC CODE
05 CITY
06 STATE
07 ZIP CODE

08 NAME
09 D+B NUMBER
10 STREET ADDRESS (P.O. Box, Apt. #, etc.)
11 SIC CODE
12 CITY
13 STATE
14 ZIP CODE

III. PREVIOUS OWNER(S) (List Prior Owners Only)

01 NAME Owens-Illinois, Inc. (1987)
02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, Apt. #, etc.) 3107 Sylvan Rd.
04 SIC CODE
05 CITY Atlanta
06 STATE GA
07 ZIP CODE 30354

IV. REALTY OWNER(S) (If Applicable: See Prior Report Form)

01 NAME SAME
02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, Apt. #, etc.)
04 SIC CODE
05 CITY
06 STATE
07 ZIP CODE

01 NAME OI Glass Container STS Inc (1987)
02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, Apt. #, etc.) 3107 Sylvan Rd
04 SIC CODE
05 CITY Atlanta
06 STATE GA
07 ZIP CODE 30354

01 NAME
02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, Apt. #, etc.)
04 SIC CODE
05 CITY
06 STATE
07 ZIP CODE

01 NAME
02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, Apt. #, etc.)
04 SIC CODE
05 CITY
06 STATE
07 ZIP CODE

01 NAME
02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, Apt. #, etc.)
04 SIC CODE
05 CITY
06 STATE
07 ZIP CODE

V. SOURCES OF INFORMATION (List sources referenced, e.g., state files, company records, etc.)

Correspondence for name change
and corporate reorganization



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 8 - OPERATOR INFORMATION

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA 0003295243

II. CURRENT OPERATOR (Provide if different from owner)

01 NAME Owens-Illinois Plastic Products Inc		02 D+B NUMBER		10 NAME		11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.) 3107 Sylvan Rd		04 SIC CODE		12 STREET ADDRESS (P.O. Box, RFD #, etc.)		13 SIC CODE	
05 CITY Atlanta		06 STATE GA	07 ZIP CODE 30354	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION 1	09 NAME OF OWNER SAME						

III. PREVIOUS OPERATOR(S) (List most recent first; provide only if different from owner)

PREVIOUS OPERATORS' PARENT COMPANIES (if applicable)

01 NAME OI Glass Container SPS Inc		02 D+B NUMBER		10 NAME		11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.) Same		04 SIC CODE		12 STREET ADDRESS (P.O. Box, RFD #, etc.)		13 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION 1	09 NAME OF OWNER DURING THIS PERIOD SAME						
01 NAME Owens-Illinois, Inc		02 D+B NUMBER		10 NAME		11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.) 3107 Sylvan Rd		04 SIC CODE		12 STREET ADDRESS (P.O. Box, RFD #, etc.)		13 SIC CODE	
05 CITY Atlanta		06 STATE GA	07 ZIP CODE 30354	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION 25	09 NAME OF OWNER DURING THIS PERIOD SAME						
01 NAME		02 D+B NUMBER		10 NAME		11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		12 STREET ADDRESS (P.O. Box, RFD #, etc.)		13 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION	09 NAME OF OWNER DURING THIS PERIOD						

IV. SOURCES OF INFORMATION (Add sources referenced, e.g., state files, operator records, reports)

State & EPA file material



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 9 - GENERATOR/TRANSPORTER INFORMATION

I. IDENTIFICATION
01 STATE 02 SITE NUMBER
GA D003295245

II. ON-SITE GENERATOR

01 NAME Owens-Illinois Plastic Products Inc	02 D-S NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.) 3107 Sylann Rd	04 SIC CODE	
05 CITY Atlanta	06 STATE GA	07 ZIP CODE 30354

III. OFF-SITE GENERATOR(S)

01 NAME	02 D-S NUMBER	01 NAME	02 D-S NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE		
05 CITY	06 STATE	07 ZIP CODE	05 CITY	06 STATE	07 ZIP CODE
01 NAME	02 D-S NUMBER	01 NAME	02 D-S NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE		
05 CITY	06 STATE	07 ZIP CODE	05 CITY	06 STATE	07 ZIP CODE

IV. TRANSPORTER(S)

01 NAME	02 D-S NUMBER	01 NAME	02 D-S NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE		
05 CITY	06 STATE	07 ZIP CODE	05 CITY	06 STATE	07 ZIP CODE
01 NAME	02 D-S NUMBER	01 NAME	02 D-S NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE		
05 CITY	06 STATE	07 ZIP CODE	05 CITY	06 STATE	07 ZIP CODE

V. SOURCES OF INFORMATION (List sources of information, e.g., owner files, company records, reports)

State and EPA file material



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 10 - PAST RESPONSE ACTIVITIES

I. IDENTIFICATION

01 STATE: 64 02 SITE NUMBER: D003295243

II. PAST RESPONSE ACTIVITIES

01 ☐ A. WATER SUPPLY CLOSED
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ B. TEMPORARY WATER SUPPLY PROVIDED
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ C. PERMANENT WATER SUPPLY PROVIDED
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ D. SPILLED MATERIAL REMOVED
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ E. CONTAMINATED SOIL REMOVED
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ F. WASTE REPACKAGED
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ G. WASTE DISPOSED ELSEWHERE
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ H. ON SITE BURIAL
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ I. IN SITU CHEMICAL TREATMENT
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ J. IN SITU BIOLOGICAL TREATMENT
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ K. IN SITU PHYSICAL TREATMENT
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ L. ENCAPSULATION
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ M. EMERGENCY WASTE TREATMENT
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ N. CUTOFF WALLS
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ O. EMERGENCY DRAIN/SURFACE WATER DIVERSION
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ P. CUTOFF TRENCHES/SUMP
04 DESCRIPTION

02 DATE

03 AGENCY

01 ☐ Q. SUBSURFACE CUTOFF WALL
04 DESCRIPTION

02 DATE

03 AGENCY



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 10 - PAST RESPONSE ACTIVITIES

I. IDENTIFICATION
01 STATE 02 SITE NUMBER

II. PAST RESPONSE ACTIVITIES *Continued*

01 ☐ R BARRIER WALLS CONSTRUCTED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 ☐ S CAPPING COVERING
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 ☐ T BULK TANKAGE REPAIRED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 ☐ U GROUT CURTAIN CONSTRUCTED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 ☐ V BOTTOM SEALED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 ☐ W GAS CONTROL
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 ☐ X FIRE CONTROL
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 ☐ Y LEACHATE TREATMENT
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 ☐ Z AREA EVACUATED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 ☐ 1 ACCESS TO SITE RESTRICTED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 ☐ 2. POPULATION RELOCATED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 ☐ 3. OTHER REMEDIAL ACTIVITIES
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

III. SOURCES OF INFORMATION *(Cite specific references, e.g., state files, agency reports, reports)*



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 11 - ENFORCEMENT INFORMATION

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. ENFORCEMENT INFORMATION

01 PAST REGULATORY ENFORCEMENT ACTION ☐ YES ☐ NO

02 DESCRIPTION OF FEDERAL, STATE, LOCAL REGULATORY/ENFORCEMENT ACTION

III. SOURCES OF INFORMATION FOR SOURCE INFORMATION, E.G., STATE REG. AGENCY OFFICIAL, ADDRESS

POTENTIAL HAZARDOUS WASTE SITE SITE INSPECTION REPORT

General Information

The Potential Hazardous Waste Site, Site Inspection Report form is used to record information collected during, or associated with, an inspection of the site and other information about responsible parties and past response activities.

The Site Inspection Report form contains eleven parts:

- Part 1 - Site Location and Inspection Information
- Part 2 - Waste Information
- Part 3 - Description of Hazardous Conditions and Incidents
- Part 4 - Permit and Descriptive Information
- Part 5 - Water, Demographic, and Environmental Data
- Part 6 - Sample and Field Information
- Part 7 - Owner Information
- Part 8 - Operator Information
- Part 9 - Generator/Transporter Information
- Part 10 - Past Response Activities
- Part 11 - Enforcement Information

Part 1 - Site Location and Inspection Information contains all of the data elements also contained on the Site Identification and Preliminary Assessment forms required to add a site to the automated Site Tracking System (STS). It is therefore possible to add a site to STS at the Site Inspection stage. Instructions are given below.

Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents are used to record specific information about substances, amounts, hazards, and targets, e.g., population potentially affected. Parts 2 and 3 are also contained in the Potential Hazardous Waste Site, Preliminary Assessment form. Information recorded on Part 2 and Part 3 during a preliminary assessment may be updated, added, deleted, or corrected on the Site Inspection Report form.

An Appendix with feedstock names and CAS Numbers and the most frequently cited hazardous substances and CAS Numbers is located behind the instructions for the Site Inspection Report.

A number of the data items collected throughout the Site Inspection Report support the Site Ranking Model. The majority of these data items are found in Part 5 - Water, Demographic, and Environmental Data.

General Instructions

1. Complete the Site Inspection Report form as completely as possible.

2. Starred items (*) are required before inspection information can be added to STS. The system will not accept incomplete inspection information.

3. To add a site to STS at the Site Inspection stage, write "New" across the top of the form and complete items 11-01, 02, 03, 04, and 05, Site Name and Location, 11-08 Coordinates, and 11-10, Type of Ownership.

4. Data items carried in STS, which are identical to those on the Site Identification and Preliminary Assessment forms and which can be added, deleted, or changed using the

Site Inspection Report form, are indicated with a pound sign (#). To ensure that the proper action is taken, outline the item(s) to be added, deleted, or changed with a bright color and indicate the proper action with "A" (add), "D" (delete) or "C" (change).

5. There are two options available for adding, deleting, or changing information supplied on the Site Inspection Report form. The first is to use a new Site Inspection Report form, completing only those items to be added, deleted, or changed. Mark the form clearly, using "A", "D", or "C", to indicate the action to be taken. If only data in STS are to be altered, the Site Source Data Report may be used. Using the report, mark clearly the items to be changed and the action to be taken.

Detailed Instructions

Part 1 Site Location and Inspection Information

I. Identification: Identification (State and Site Number) is the site record key, or primary identifier, for the site. Site records in the STS are updated based on Identification. It is essential that State and Site Number are correctly entered on each form.

*1-01 State: Enter the two character alpha FIPS code for the state in which the site is located. It must be identical to State on the Site Identification form.

*1-02 Site Number: Enter the ten character alphanumeric code for sites which have a Dun and Bradstreet or EPA "user" Dun and Bradstreet number or the ten character numeric GSA identification code for federal sites. The Site Number must be identical to the Site Number on the Site Identification and Preliminary Assessment forms.

II. Site Name and Location: If Site Name and Location information require no additions or changes, these items are not required on the Site Inspection Report form. However, completing these items will facilitate use of the completed form and records management procedures.

#11-01 Site Name: Enter the legal, common, or descriptive name of the site.

#11-02 Site Street: Enter the street address and number (if appropriate) where the site is located. If the precise street address is unavailable for this site, enter brief direction identifier, e.g., NW Jct I-295 & US 99; Post Rd, 5 mi W of Rt. 5.

#11-03 Site City: Enter the city, town, village, or other municipality in which the site is located. If the site is not located in a municipality, enter the name of the municipality (or place) which is nearest the site or which most easily locates the site.

#11-04 Site State: Enter the two character alpha FIPS code for the state in which the site is located. The code must be the same as in item 1-01.

#11-05 Site Zip Code: Enter the five character numeric zip code for the postal zone in which the site is located.

- *III-06 Site County: Enter the name of the county, parish (Louisiana), or borough (Alaska) in which the site is located.
 - *III-07 County Code: Enter the three character numeric FIPS county code for the county, parish, or borough in which the site is located. (The regional data analyst can furnish this data item.)
 - *III-08 Site Congressional District: Enter the two character number for the congressional district in which the site is located.
 - *III-09 Coordinates: Enter the Coordinates, Latitude and Longitude, of the site in degrees, minutes, seconds, and tenths of seconds. If a tenth of a second is insignificant at this site, enter "0" in the tenths position.
 - *III-10 Type of Ownership: Check the appropriate box to indicate the type of site ownership. If the site is under the jurisdiction of an activity of the federal government, enter the name of the department, agency, or activity. If Other is indicated, specify the type of ownership and name.
- III. Inspection Information**
- *III-01 Date of Inspection: Enter the date the inspection occurred, or began for multiple day inspections.
 - *III-02 Site Status: Check the appropriate box(es) to indicate the current status of the site. Active sites are those which treat, store, or dispose of wastes. Check Active for those active sites with an inactive storage or disposal area. Inactive sites are those at which treatment, storage, or disposal activities no longer occur.
 - *III-03 Years of Operation: Enter the beginning and ending years (or beginning only if operations at the site are on-going), e.g., 1978/1982, of site operation. Check Unknown if years of operation are not known.
 - *III-04 Agency Performing Inspection: Check the appropriate box(es) to indicate parties participating in the inspection. If contractors participate, provide the name of the firm(s).
 - III-05 Chief Inspector: Enter the name of the chief, or lead inspector.
 - III-06 Title: Enter the Chief Inspector's title, e.g., Team Leader, FIT team.
 - III-07 Organization: Enter the name of the organization where the Chief Inspector is employed, e.g., EPA - Region 4, VA State Health Dept., Environmental Research Co.
 - III-08 Telephone Number: Enter the Chief Inspector's area code and local commercial telephone number.
 - III-09 Other Inspectors: Enter the names of other parties participating in the inspection.
 - III-10 Title: Enter the titles of other parties participating in the inspection.
 - III-11 Organization: Enter the names of the organizations where other parties participating in the inspection are employed.
 - III-12 Telephone Number: Enter the area code and local commercial telephone numbers of other parties participating in the inspection.

- III-13 Site Representatives Interviewed: Enter the names of individuals representing responsible parties interviewed in connection with the inspection. Interviews do not necessarily occur during the inspection.
- III-14 Title: Enter the titles of the individuals interviewed.
- III-15 Address: Enter the business, mailing, or residential addresses of the individuals interviewed.
- III-16 Telephone Number: Enter the area code and local commercial telephone numbers of the individuals interviewed.
- III-17 Access Gained By: Check the appropriate box to indicate whether access to the site was gained through permission or warrant.
- III-18 Time of Inspection: Using a 24-hour clock, enter the time the inspection began, e.g., for 3:24 p.m. enter 1524.
- III-19 Weather Conditions: Describe the weather conditions during the site inspection, especially any unusual conditions which might affect results or observations taken.

IV. Information Available From

- IV-01 Contact: Enter the name of the individual who can provide information about the site.
- IV-02 Of: If appropriate, enter the name of the public or private agency, firm, or company and the organization within the agency, firm, or company of the individual named as Contact.
- IV-03 Telephone Number: Enter the area code and local telephone number of the individual named as contact.
- IV-04 Person Responsible for Site Inspection Report Form: Enter the name of the individual who was responsible for the information entered on the Site Inspection Report form. The person responsible for the Site Inspection Report form may be different from the individual who prepared the form.
- IV-05 Agency: Enter the name of the Agency where the individual who is responsible for the Site Inspection Report form is employed.
- IV-06 Organization: Enter the name of the organization within the Agency.
- IV-07 Telephone Number: Enter the area code and local telephone number of the individual who is responsible for the Site Inspection Report form.
- IV-08 Date: Enter the date the Site Inspection Report form was prepared.

Part 2 Waste Information

- *I. Identification: Refer to Part 1-I.
- II. Waste Status, Quantities, and Characteristics: Waste Status, Quantities, and Characteristics provide information about the physical structure and form of the waste, measures of gross amounts at the site, and the hazards posed by the waste, considering acute and chronic health effects and mobility along a pathway.

- *II-01 Physical States: Check the appropriate box(es) to indicate the state(s) of waste present at the site. If Other is indicated, specify the physical state of the waste.
- *II-02 Waste Quantity at Site: Enter estimates of amounts of waste at the site. Estimates may be in weight (Tons) or volume (Cubic Yards or Number of Drums). Use as many entries as are appropriate; however, measurements must be independent. For example, do not measure the same amounts of waste as both tons and cubic yards.
- *II-03 Waste Characteristics: Check all appropriate entries to indicate the hazards posed by waste at the site. If waste at the site poses no hazard, check Not Applicable.
- III. Waste Category: General categories of waste typically found are listed here. Enter the estimated gross amount of each category of waste and the appropriate unit of measure.
- *III-01 Gross Amount: Gross Amount is the estimate of the amount of the waste category found at the site. Estimates should be furnished in metric tons (MT), tons (TN), cubic meters (CM), cubic yards (CY), drums (DR), acres (AC), acre feet (AF), liters (LT), or gallons (GA). Enter the estimated amount next to the appropriate waste category.
- *III-02 Unit of Measure: Enter the appropriate unit of measure, MT (metric tons), TN (tons), CM (cubic meters), CY (cubic yards), DR (number of drums), AC (acres), AF (acre feet), LT (liters), or GA (gallons) next to the estimate of gross amount.
- III-03 Comments: Comments may be used to further explain, or provide additional information, about particular waste categories.
- IV. Hazardous Substances: Specific hazardous, or potentially hazardous, chemicals, mixtures, and substances found at the site are listed here. For each substance listed those data items marked with an "at" sign (ⓐ) must be included.
- ⓐIV-01 Category: Enter in front of the substance name the three character waste category from Section III which best describes the substance, e.g., OLW (Oily Waste).
- ⓐIV-02 Substance Name: Enter one of the following: the name of the substance registered with the Chemical Abstract Service, the common or accepted abbreviation of the substance, the generic name of the substance, or commercial name of the substance.
- ⓐIV-03 CAS Number: Enter the number assigned to the substance when it was registered with the Chemical Abstract Service. Refer to the Appendix for most frequently cited CAS Numbers. CAS Numbers must be furnished for each substance listed. If a CAS Number for this substance has not been assigned, enter "999".
- ⓐIV-04 Storage/Disposal Method: Enter the type of storage or disposal facility in which the substance was found: SI (surface impoundment, including pits, ponds, and lagoons), PL (pile), DR (drum), TK (tank), LF (landfill), LM (landfarm), OD (open dump).

- IV-05 Concentration: Enter the concentration of the substance found in samples taken at the site.
- IV-06 Measure of Concentration: Enter the appropriate unit of measure for the measured concentration of the substance found in the sample, e.g., MG/L, UG/L.

V. Feedstocks

- V-01 Feedstock Name: If feedstocks, or substances derived from one or more feedstocks, are present at the site, enter the name of each feedstock found. See the Appendix for the feedstock list.
- V-02 CAS Number: Enter the CAS Number for each feedstock named. See the Appendix for feedstock CAS Numbers.

- VI. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 3 Description of Hazardous Conditions and Incidents

- *I. Identification: Refer to Part 1-1.
- II. Hazardous Conditions and Incidents:
- II-01 Hazards: Indicate each hazardous, or potentially hazardous, condition known, or claimed, to exist at the site.
- II-02 Observed, Potential, or Alleged: Check Observed and enter the date, or approximate date, of occurrence if a release of contaminants to the environment, or some other hazardous incident, is known to have occurred. In cases of a continuing release, e.g., groundwater contamination, enter the date, or approximate date, the condition first became apparent. If conditions exist for a potential release, check potential. Check Alleged for hazardous, or potentially hazardous, conditions claimed to exist at the site.
- II-03 Population Potentially Affected: For each hazardous condition at the site, enter the number of people potentially affected. For Soil enter the number of acres potentially affected.
- II-04 Narrative Description: Provide a narrative description, or explanation, of each condition. Include any additional information which further explains the condition.
- II-05 Description of Any Other Known, Potential, or Alleged Hazards: Provide a narrative description of any other hazardous, or potentially hazardous, conditions at the site not covered above.
- III. Total Population Potentially Affected: Enter the total number of people potentially affected by the existence of hazardous, or potentially hazardous, conditions at the site. Do not sum the numbers shown for each condition.
- IV. Comments: Other information relevant to observed, potential, or alleged hazards may be entered here.

- V Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 4 Permit and Descriptive Information

- *I. Identification: Refer to Part 1-1.

II. Permit Information

- II-01 Type of Permit Issued: Check the appropriate box(es) to indicate the types of permits issued to the site. If state, local, or other types of environmental permits have been issued, specify the type.
- II-02 Permit Number: Enter the permit number for each issued permit.
- II-03 Date Issued: Enter the date each permit was issued.
- II-04 Expiration Date: Enter the date each permit expires or expired.
- II-05 Comments: Enter any information which further explains the types of permits issued or status of the permits.

III. Site Description

- *III-01 Storage/Disposal: Check the appropriate box(es) to indicate the types of storage/disposal facilities found at the site. If Other is checked, specify the type of facility.
- *III-02 Amount: Enter the gross amount of waste associated with each type of storage/disposal facility. Amounts may be measured in: metric tons, tons, cubic meters, cubic yards, drums, acres, acre feet, liters, or gallons.
- *III-03 Unit of Measure: Enter the appropriate unit of measure for each entry. Units of measure are MT (metric tons), TN (tons), CM (cubic meters), CY (cubic yards), DR (drums), AC (acres), AF (acre feet), LT (liters), or GA (gallons).
- *III-04 Treatment: If waste is treated at the site, check the appropriate box(es) to indicate treatment methods used. If Other is checked, specify treatment method.
- III-05 Other: If there are buildings on site, check this box.
- *III-06 Area of Site: Enter total area of site in acres.
- III-07 Comments: Enter any other pertinent information.

- IV. Containment: Containment is a measure of the natural or artificial means taken to minimize or preclude health hazards and to minimize or prevent contamination of the environment from waste at the site.

- *IV-01 Containment of Wastes: Check the appropriate box to indicate the condition of containment measures at the site. When choosing the appropriate box, consider the potential for environmental contamination, i.e., the worst case for containment in conjunction with the most hazardous substances.

- IV-02 Description of Drums, Diking, Liners, Barriers: Provide a narrative description of the condition of containment measures at the site, e.g., waste ade-

quately contained, drums rusting and leaking, diking collapsing, liners leaking and contaminants leaching into soil and groundwater.

- V. Accessibility: Accessibility is an indicator of the potential for direct contact with hazardous substances.

- *V-01 Waste Easily Accessible: If there are no real barriers preventing human access to hazardous waste, check Yes, otherwise check No.

- V-02 Comments: Additional information about accessibility to hazardous waste may be provided.

- VI. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 5 Water, Demographic, and Environmental Data

- *I. Identification: Refer to Part 1-1.

II. Drinking Water Supply

- II-01 Type of Drinking Water Supply: Check the appropriate box(es) to indicate the types and sources of drinking water within the vicinity of the site. Community refers to municipal sources. Non-community refers to private sources, e.g., private wells.
- II-02 Status: Check the appropriate box(es) to indicate whether the water supply is endangered or affected by contaminants from the site. Check the appropriate box to indicate if the water supply is being monitored for possible contamination.
- II-03 Distance to Site: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to nearest drinking water source.

III. Groundwater

- III-01 Groundwater Use in Vicinity: Check the appropriate box to indicate groundwater use in the vicinity of the site. The concern is to indicate the seriousness of groundwater contamination from waste at the site. Only Source for Drinking indicates that current water sources are limited to wells in the vicinity of the site. Drinking; Commercial, Industrial, Irrigation indicates that groundwater is used for drinking, but that other limited drinking sources are available and that no other sources for these additional uses are available. Commercial, Industrial, Irrigation indicates that groundwater is used for these purposes, but that limited other sources of water are available. Not used, Unusable indicates that groundwater use in the area is not critical.

- III-02 Population Served by Groundwater: Enter the number of people served by groundwater in the vicinity of the site. Population for the purpose of the Site Inspection Report includes residents and daytime workers and students but excludes transients in the neighborhood or on local highways and roads. When estimating population from aerial photographs or other sources, the conversion factor is 3.8 persons for each dwelling unit or 3 persons per acre in rural areas.

III-03 Distance to Nearest Drinking Water Well: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the nearest drinking water well.

III-04 Depth to Groundwater: Enter the depth in feet to groundwater.

III-05 Depth of Groundwater Flow: Enter the cardinal direction of groundwater flow, e.g., NNW.

III-06 Depth to Aquifer of Concern: Enter the depth in feet to the aquifer of concern.

III-07 Potential Yield of Aquifer: Enter the potential yield of the aquifer in gallons per day.

III-08 Sole Source Aquifer: Check the appropriate box to indicate the aquifer of concern is, or is not, a sole source aquifer.

III-09 Description of Wells: Provide a narrative description of wells in the vicinity of the site, including useage, depth, and location relative to population and buildings.

III-10 Recharge Area: Check the appropriate box to indicate the site is located in a recharge area. Comments provide additional information on the recharge area.

III-11 Discharge Area: Check the appropriate box to indicate the site is located in a discharge area. Comments provide additional information on the discharge area.

IV. Surface Water

IV-01 Surface Water Use: Check the appropriate box to indicate surface water use in the vicinity of the site. The order of precedence is Reservoir, Recreation, Drinking Water Source; Irrigation, Economically Important Reserves; Commercial/Industrial; Not Currently Used.

IV-02 Affected/Potentially Affected Bodies of Water: Enter the names of bodies of surface water affected, or potentially affected, by contaminants from the site. List the body of surface water nearest the site first. For each body of water check Affected if contaminants have been identified in samples of the water. Enter the shortest distance from the body of water to the site in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required).

V. Demographic and Property Information

V-01 Total Population Within: Enter the total population within one (1) mile, two (2) miles, and three (3) miles of the site. Distances are measured from site boundaries. Population for the purpose of the Site Inspection Report includes residents and daytime workers and students but excludes transients in the neighborhood or on local highways and roads. When estimating population from aerial photographs or other sources, the conversion factor is 3.8 persons for each dwelling unit or 3 persons per acre in rural areas.

V-02 Distance to Nearest Population: Enter in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) the dis-

tance from the site boundary to the nearest population (one person minimum).

V-03 Number of Buildings Within Two (2) Miles of Site: Enter the number of buildings within two miles from the boundaries of the site.

V-04 Distance to Nearest Off-Site Building: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site boundary to the nearest off-site building.

V-05 Population in Vicinity of Site: Provide a narrative description of the nature of the population within the vicinity of the site. Examples include rural area, small truck farms, urban industrial area, densely populated urban residential area.

VI. Environmental Information

VI-01 Permeability of Unsaturated Zone: Check the appropriate box to indicate the permeability of the earth material above the water table in the vicinity of the site.

VI-02 Permeability of Bedrock: Check the appropriate box to indicate the permeability of the bedrock in the vicinity of the site.

VI-03 Depth to Bedrock: Enter the depth to bedrock in feet.

VI-04 Depth of Contaminated Soil Zone: Enter the depth of the contaminated soil zone in feet.

VI-05 Soil pH: Enter the pH of the soil in the vicinity of the site.

VI-06 Net Precipitation: Enter net precipitation in inches. If net precipitation is not known, subtract the average evaporation figure on the U.S. National Weather Service map showing average annual evaporation in inches from the U.S. Environmental Data Service map showing mean annual precipitation.

VI-07 One Year 24 Hour Rainfall: Enter in inches the figure for one year 24 hour rainfall.

VI-08 Slope: Enter the percentage of site slope, the direction of site slope, and the percentage of the surrounding terrain average slope.

VI-09 Flood Potential: Enter the boundary year for the floodplain in which the site is located. Sites flooded annually are in a 1 (one) year floodplain. Other examples include 10, 20, 50, 100, 500, etc., indicating the probability of flooding within that time period.

VI-10 Site is on Barrier Island, Coastal High Hazard Area, Riverine Floodway: If site is located in one of these areas, check this box.

VI-11 Distance to Wetlands: If applicable, enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the closest wetlands (five acre minimum) for Estuarine and Other types of wetlands.

VI-12 Distance to Critical Habitat: If applicable, enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the nearest critical habitat

of an endangered species. Enter the name(s) of the endangered species.

VI-13 Land Use in Vicinity: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) to the nearest Commercial/Industrial area; Residential Area; National/State Parks, Forests, or Wildlife Reserves; or Agricultural Lands, Prime Ag Land and Ag Land. Prime Ag Land is that crop, pasture, range, or forest land which produces the highest yield in relation to inputs. Ag Land is the remaining agricultural land, frequently considered marginal.

VI-14 Description of Site in Relation to Surrounding Topography: Provide a narrative description of significant or unusual aspects of the surrounding topography in relation to the site. Examples might include: site is in a valley surrounded on all sides by mountains, site is at edge of a river or stream which floods frequently, etc.

VII. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 8 Sample and Field Information

***I. Identification:** Refer to Part 1-I.

II. Samples Taken

II-01 Number of Samples Taken: Next to each sample type enter the number of samples of that type taken.

II-02 Samples Sent To: Enter the name of the laboratory or other facility where the samples were sent for analysis.

II-03 Estimated Date Results Available: Enter the estimated date the results are expected to be available.

III. Field Measurements Taken

III-01 Type: Enter the type, e.g., radioactivity, explosivity, organic vapor or gas detection and analysis, reagent type gas detection, of each field measurement taken.

III-02 Comments: Describe results of field measurements, whether they were taken on or off site, and if applicable, the type of disposal facility tested, e.g., drum, surface impoundment, landfill.

IV. Photographs and Maps

IV-01 Type: If photographs of the site have been taken, check the appropriate box(es) to indicate the type.

IV-02 In Custody Of: Enter the name of the organization or person who has custody of the photographs.

IV-03 Maps: Check the appropriate box to indicate that maps of the site area have been prepared or obtained.

IV-04 Location of Maps: If site maps are available, indicate their location, e.g., Region 1 Air and Hazardous Materials Division.

V. Other Field Data Collected: Provide a narrative description of any other field data collected.

VI. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 7 Owner Information

***I. Identification:** Refer to Part 1-I.

II. Current Owner(s) - Parent Company: Current owner(s) and parent companies, for those owners which are companies partly or wholly owned by another company, provide locator information about responsible parties. Each Part 7 provides space for four (4) current owners and their respective parent companies. If additional space is required, complete another Part 7.

II-01 Name: Enter the legal name of the owner of the site. The owner may be a firm, government agency, association, individual, etc.

II-02 D&B Number: Where available, enter the owner's D&B (Dun and Bradstreet) number. If the current owner is a federal agency, enter the GSA identification code.

II-03 Street Address: Enter the business, mailing, or residential street address of the owner.

II-04 SIC Code: If applicable, enter the owner's primary SIC Code.

II-05 City: Enter the city of the owner's business, mailing, or residential address.

II-06 State: Enter the two character alpha FIPS code for the state of the owner's business, mailing, or residential address.

II-07 Zip Code: Enter the five digit zip code for the owner's business, mailing, or residential address.

II-08 Name: If the owner is a partly or wholly owned subsidiary of another company, enter the legal name of the owner's parent company.

II-09 D&B Number: Enter the parent company's Dun and Bradstreet number.

II-10 Street Address: Enter the business or mailing street address of the parent company.

II-11 SIC Code: If applicable, enter the parent company's primary SIC code.

II-12 City: Enter the city of the parent company's business or mailing address.

II-13 State: Enter the two character alpha FIPS code for the state of the parent company's business or mailing address.

II-14 Zip Code: Enter the five digit zip code for the parent company's business or mailing address.

III. Previous Owner(s): List previous owners in reverse chronological order, i.e., most recent first. If additional space is required, complete another Part 7.

III-01 Name: Enter the legal name of the previous owner. The previous owner may have been a firm, government agency, association, individual, etc.

- III-02 D&B Number: Enter the previous owner's Dun and Bradstreet number if available. If the previous owner was a federal agency, enter the GSA identification code if available.
- III-03 Street Address: Enter the business, mailing, or residential street address of the previous owner.
- III-04 SIC Code: If applicable, enter the primary SIC Code of the previous owner.
- III-05 City: Enter the city of the previous owner's business, mailing, or residential address.
- III-06 State: Enter the two character alpha FIPS code for the state of the previous owner's business, mailing, or residential address.
- III-07 Zip Code: Enter the zip code of the previous owner's business, mailing, or residential address.
- IV. Realty Owner(s): Realty owner applies when the owner leased to another entity property which was used for the storage or disposal of hazardous waste. List current or most recent first.
- IV-01 Name: Enter the legal name of the realty owner. The realty owner may be a firm, government agency, association, individual, etc.
- IV-02 D&B Number: Enter the previous owner's Dun and Bradstreet number if available. If the previous owner was a federal agency, enter the GSA identification code if available.
- IV-03 Street Address: Enter the realty owner's business, mailing, or residential street address.
- IV-04 SIC Code: If applicable, enter the realty owner's primary SIC Code.
- IV-05 City: Enter the city of the realty owner's business, mailing, or residential address.
- IV-06 State: Enter the two character alpha FIPS code for the state of the realty owner's business, mailing, or residential address.
- IV-07 Zip Code: Enter the zip code of the realty owner's business, mailing, or residential address.
- V. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part B Operator Information

- *I. Identification: Refer to Part 1-I.
- II. Current Operator—Operator's Parent Company: Information on operators is applicable when the operator is not the owner.
- II-01 Name: Enter the legal name of the operator. The operator may be a firm, government agency, association, individual, etc.
- II-02 D&B Number: Enter the operator's Dun and Bradstreet number if available. If the operator is a federal agency, enter the GSA identification code if available.

- II-03 Street Address: Enter the operator's business, mailing, or residential street address.
- II-04 SIC Code: If applicable, enter the operator's primary SIC Code.
- II-05 City: Enter the city of the operator's business, mailing, or residential address.
- II-06 State: Enter the two character alpha FIPS code for the state of the operator's business, mailing, or residential address.
- II-07 Zip Code: Enter the zip code of the operator's business, mailing, or residential address.
- II-08 Years of Operation: Enter the beginning and ending years (or beginning only if operations are on-going), e.g., 1932/1948, of operation at the site.
- II-09 Name of Owner: Enter the name of the owner for the period cited for this operator.
- II-10 Name: If applicable, enter the legal name of the operator's parent company.
- II-11 D&B Number: Enter the operator's parent company Dun and Bradstreet number if available.
- II-12 Street Address: Enter the operator's parent company business, mailing, or residential street address.
- II-13 SIC Code: If applicable, enter the operator's parent company primary SIC Code.
- II-14 City: Enter the city of the operator's parent company business, mailing, or residential address.
- II-15 State: Enter the two character alpha FIPS code for the state of the operator's parent company business, mailing, or residential address.
- II-16 Zip Code: Enter the zip code of the operator's parent company business, mailing, or residential address.
- III. Previous Operator(s)—Previous Operators' Parent Companies
- III-01 Name: Enter the legal name of the previous operator. The previous operator may be a firm, government agency, association, individual, etc.
- III-02 D&B Number: Enter the previous operator's Dun and Bradstreet number if available. If the previous operator was a federal agency, enter the GSA identification code if available.
- III-03 Street Address: Enter the previous operator's business, mailing, or residential street address.
- III-04 SIC Code: If applicable, enter the previous operator's primary SIC Code.
- III-05 City: Enter the city of the previous operator's business, mailing, or residential address.
- III-06 State: Enter the two character alpha FIPS code for the state of the previous operator's business, mailing, or residential address.
- III-07 Zip Code: Enter the zip code of the previous operator's business, mailing, or residential address.
- III-08 Years of Operation: Enter the beginning and ending years of operation for this operator at the site.
- III-09 Name of Owner: Enter the name of the owner for the period cited for this operator.

- III-10 Name: If applicable, enter the legal name of the previous operator's parent company.
- III-11 D&B Number: Enter the previous operator's parent company Dun and Bradstreet number if available.
- III-12 Street Address: Enter the previous operator's parent company business, mailing, or residential street address.
- III-13 SIC Code: If applicable, enter the previous operator's parent company primary SIC Code.
- III-14 City: Enter the city of the previous operator's parent company business, mailing, or residential address.
- III-15 State: Enter the two character alpha FIPS code for the state of the previous operator's parent company business, mailing, or residential address.
- III-16 Zip Code: Enter the zip code of the previous operator's parent company business, mailing, or residential address.

IV. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 9 Generator/Transporter Information

***I. Identification:** Refer to Part 1-I.

II. On-Site Generator: A company or agency, located within the contiguous area of the site and generating waste disposed on the site, is entered here.

- II-01 Name: If there is an on-site generator, enter the legal name of the on-site generator. The on-site generator may be a firm or government agency.
- II-02 D&B Number: Where available, enter the on-site generator's D&B (Dun and Bradstreet) number. If the on-site generator is a federal agency, enter the GSA identification code.
- II-03 Street Address: Enter the business or mailing street address of the on-site generator.
- II-04 SIC Code: If applicable, enter the on-site generator's primary SIC Code.
- II-05 City: Enter the city of the on-site generator's business or mailing address.
- II-06 State: Enter the two character alpha FIPS code for the state of the on-site generator's business or mailing address.
- II-07 Zip Code: Enter the five digit zip code for the on-site generator's business or mailing address.

III. Off-Site Generator(s): Those companies or agencies off-site who have generated waste which has been disposed at the site are listed here.

- III-01 Name: Enter the legal name of the off-site generator. The off-site generator may be a firm or government agency.
- III-02 D&B Number: Where available, enter the off-site generator's D&B (Dun and Bradstreet) number. If the off-site generator is a federal agency, enter the GSA identification code.

- III-03 Street Address: Enter the business or mailing street address of the off-site generator.
- III-04 SIC Code: If applicable, enter the off-site generator's primary SIC Code.
- III-05 City: Enter the city of the off-site generator's business or mailing address.
- III-06 State: Enter the two character alpha FIPS code for the state of the off-site generator's business or mailing address.
- III-07 Zip Code: Enter the five digit zip code for the off-site generator's business or mailing address.

IV. Transporter(s): Those carriers who are known to have transported waste to the site are listed here.

- IV-01 Name: Enter the legal name of the transporter. The transporter may be a firm, government agency, association, individual, etc.
- IV-02 D&B Number: Where available, enter the transporter's D&B (Dun and Bradstreet) number. If the transporter is a federal agency, enter the GSA identification code.
- IV-03 Street Address: Enter the business, mailing, or residential street address of the transporter.
- IV-04 SIC Code: If applicable, enter the transporter's primary SIC Code.
- IV-05 City: Enter the city of the transporter's business, mailing, or residential address.
- IV-06 State: Enter the two character alpha FIPS code for the state of the transporter's business, mailing, or residential address.
- IV-07 Zip Code: Enter the five digit zip code for the transporter's business, mailing, or residential address.

V. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 10 Past Response Activities

***I. Identification:** Refer to Part 1-I.

II. Past Response Activities

- II-01 Past Response Activities: Check the appropriate box(es) to indicate response activities initiated prior to the passage of CERCLA, December, 1980.
- II-02 Date: Enter the start date (or approximate date) of the activity.
- II-03 Agency: Enter the name of the Agency responsible for the activity.
- II-04 Description: Provide a brief narrative description of the activity.

III. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

SITE INSPECTION REPORT

Part 11 Enforcement Information

I. Identification. Refer to Part 1-1.

II. Enforcement Information

II-01 Past Regulatory Enforcement Action: Check the appropriate box to indicate past regulatory or enforcement action at the federal, state, or local level related to this site.

II-02 Description of Federal, State, Local Regulatory or Enforcement Action: Provide a narrative description

of regulatory or enforcement action to date. Do not include any enforcement action contemplated in the process of development.

III.

Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

APPENDIX

I. FEEDSTOCKS

CAS Number	Chemical Name	CAS Number	Chemical Name	CAS Number	Chemical Name
1. 7664-41-7	Ammonia	14. 1317-38-0	Cupric Oxide	27. 7778-80-8	Potassium Dichromate
2. 7440-38-0	Antimony	15. 7758-88-7	Cupric Sulfate	28. 1310-88-3	Potassium Hydroxide
3. 1308-64-4	Antimony Trioxide	16. 1317-38-1	Cuprous Oxide	29. 115-07-1	Propylene
4. 7440-38-2	Arsenic	17. 74-85-1	Ethylene	30. 10888-01-8	Sodium Dichromate
5. 1327-53-3	Arsenic Trioxide	18. 7847-01-0	Hydrochloric Acid	31. 1310-73-2	Sodium Hydroxide
6. 21109-95-6	Barium Sulfide	19. 7884-38-3	Hydrogen Fluoride	32. 7848-78-8	Stannic Chloride
7. 7726-95-8	Bromine	20. 1338-25-7	Lead Oxide	33. 7772-98-8	Stannous Chloride
8. 106-99-0	Butadiene	21. 7438-67-8	Mercury	34. 7884-83-8	Sulfuric Acid
9. 7440-43-8	Cadmium	22. 74-82-8	Methane	35. 108-88-3	Toluene
10. 7782-60-6	Chlorine	23. 91-20-3	Naphthalene	36. 1330-20-7	Xylene
11. 12737-27-8	Chromite	24. 7440-02-0	Nickel	37. 7848-86-7	Zinc Chloride
12. 7440-47-3	Chromium	25. 7897-37-2	Nitric Acid	38. 7733-02-0	Zinc Sulfate
13. 7440-48-4	Cobalt	26. 7723-14-0	Phosphorus		

II. HAZARDOUS SUBSTANCES

CAS Number	Chemical Name	CAS Number	Chemical Name	CAS Number	Chemical Name
1. 75-07-0	Acetaldehyde	47. 1303-33-8	Arsenic Trisulfide	92. 142-71-2	Cupric Acetate
2. 64-19-7	Acetic Acid	48. 842-82-1	Barium Cyanide	93. 12002-03-8	Cupric Acetoarsenite
3. 108-24-7	Acetic Anhydride	49. 71-43-2	Benzene	94. 7447-38-4	Cupric Chloride
4. 75-86-8	Acetone Cyanohydrin	50. 85-85-0	Benzoic Acid	95. 3281-23-8	Cupric Nitrate
5. 508-98-7	Acetyl Bromide	51. 100-47-0	Benzonitrile	96. 8883-88-3	Cupric Oxalate
6. 75-36-6	Acetyl Chloride	52. 98-88-4	Benzoyl Chloride	97. 7788-88-7	Cupric Sulfate
7. 107-02-8	Acrolein	53. 100-44-7	Benzyl Chloride	98. 10380-28-7	Cupric Sulfate Ammoniated
8. 107-13-1	Acrylonitrile	54. 7440-41-7	Beryllium	99. 818-82-7	Cupric Tartrate
9. 124-04-8	Adipic Acid	55. 7787-47-8	Beryllium Chloride	100. 808-77-4	Cyanogen Chloride
10. 308-00-2	Aldrin	56. 7787-48-7	Beryllium Fluoride	101. 110-82-7	Cyclohexane
11. 10043-01-3	Aluminum Sulfate	57. 13287-88-4	Beryllium Nitrate	102. 94-75-7	2,4-O Acid
12. 107-18-6	Allyl Alcohol	58. 123-88-4	Butyl Acetate	103. 94-11-1	2,4-O Esters
13. 107-08-1	Allyl Chloride	59. 84-74-2	n-Butyl Phthalate	104. 80-28-3	DDT
14. 7664-41-7	Ammonia	60. 108-73-8	Butylamine	105. 333-41-8	Diazinon
15. 631-61-8	Ammonium Acetate	61. 107-82-8	Butyric Acid	106. 1918-00-8	Diazinon
16. 1883-83-4	Ammonium Benzoate	62. 843-80-8	Cadmium Acetate	107. 1194-88-8	Dichlorobenzil
17. 1088-33-7	Ammonium Bicarbonate	63. 7788-43-8	Cadmium Bromide	108. 117-80-8	Dichlorobenzil
18. 7788-08-8	Ammonium Dichromate	64. 10108-84-2	Cadmium Chloride	109. 25321-22-8	Dichlorobenzene (all isomers)
19. 1341-48-7	Ammonium Difluoride	65. 7778-44-1	Calcium Arsenate	110. 288-38-19-7	Dichloropropene (all isomers)
20. 10192-30-0	Ammonium Disulfide	66. 83748-18-8	Calcium Arsenite	111. 28833-23-8	Dichloropropene (all isomers)
21. 1111-78-0	Ammonium Carbonate	67. 78-28-7	Calcium Carbide	112. 8883-18-8	Dichloropropene-Dichloropropene Mixture
22. 12128-02-8	Ammonium Chloride	68. 13788-19-8	Calcium Chromate	113. 78-88-8	2,2-Dichloropropionic Acid
23. 7788-88-8	Ammonium Chromate	69. 883-81-8	Calcium Cyanide	114. 83-73-7	Dichlorvos
24. 3012-88-8	Ammonium Chlorate, Difluoride	70. 28284-88-2	Calcium Dodecylbenzene Sulfonate	115. 88-87-1	Dieldrin
25. 13828-83-0	Ammonium Fluoborate	71. 7778-84-3	Calcium Hypochlorite	116. 108-88-7	Diethylamine
26. 12128-01-8	Ammonium Fluoride	72. 133-88-3	Capran	117. 124-48-3	Dimethylamine
27. 1338-21-8	Ammonium Hydroxide	73. 63-28-2	Carbaryl	118. 28184-84-8	Dinitrobenzene (all isomers)
28. 8008-70-7	Ammonium Oxalate	74. 1883-88-2	Carburene	119. 81-28-8	Dinitrophenol
29. 18819-18-0	Ammonium Silicofluoride	75. 78-18-0	Carbon Disulfide	120. 25321-14-8	Dinitrotoluene (all isomers)
30. 7773-08-0	Ammonium Sulfamate	76. 88-23-8	Carbon Tetrachloride	121. 88-88-7	Diquat
31. 12138-78-1	Ammonium Sulfide	77. 87-74-8	Chlordane	122. 288-84-4	Diautofen
32. 10188-04-0	Ammonium Sulfite	78. 7782-88-8	Chlorine	123. 338-84-1	Diuron
33. 14307-43-8	Ammonium Tartrate	79. 108-88-7	Chlorobenzene	124. 27178-87-8	Dodecylbenzenesulfonic Acid
34. 1782-88-4	Ammonium Thiocyanate	80. 87-88-3	Chloroform	125. 118-28-7	Endosulfan (all isomers)
35. 7783-18-8	Ammonium Thiosulfate	81. 7788-84-8	Chlorosulfonic Acid	126. 72-30-8	Endrin and Metabolites
36. 828-83-7	Amyl Acetate	82. 2821-88-2	Chlorpyrifos	127. 108-88-8	Epithiorhydrin
37. 82-83-3	Aniline	83. 1088-30-4	Chromic Acetate	128. 883-12-2	Ethion
38. 7847-18-8	Antimony Pentachloride	84. 7738-84-8	Chromic Acid	129. 108-41-4	Ethyl Benzene
39. 7788-81-8	Antimony Tribromide	85. 10101-83-8	Chromic Sulfate	130. 107-18-3	Ethylene Diamine
40. 10028-81-8	Antimony Trichloride	86. 10048-08-8	Chromous Chloride	131. 108-83-4	Ethylene Dibromide
41. 7783-88-4	Antimony Trifluoride	87. 844-18-3	Cobaltous Formate	132. 107-08-2	Ethylene Dichloride
42. 1308-84-4	Antimony Trioxide	88. 14017-41-8	Cobaltous Sulfamate	133. 88-88-4	EDTA
43. 1303-32-8	Arsenic Disulfide	89. 88-72-4	Coumataphos	134. 1188-87-8	Ferric Ammonium Citrate
44. 1303-28-2	Arsenic Pentoxide	90. 1318-77-3	Cress	135. 2844-87-4	Ferric Ammonium Oxalate
45. 7784-34-1	Arsenic Trichloride	91. 4170-30-3	Cresol	136. 7708-88-8	Ferric Chloride
46. 1327-83-3	Arsenic Trioxide		Cresolaldehyde		

HAZARD RANKING SYSTEM SCORING SUMMARY

FOR

OWENS-ILLINOIS, INC PLANT 10
EPA SITE NUMBER 84000227024E
ATLANTA
FULTON COUNTY, GA
EPA REGION: 4

SCORE STATUS: IN PREPARATION

SCORED BY MITCH COHEN
OF NUS CORPORATION
ON 05/12/89

DATE OF THIS REPORT: 05/12/89
DATE OF LAST MODIFICATION: 05/12/89

GROUND WATER ROUTE SCORE : 13.98
SURFACE WATER ROUTE SCORE: 4.92
AIR ROUTE SCORE : 0.00

MIGRATION SCORE : 8.54

**F.O.I.A.
EXEMPTION 5**

Jul 7, 1991
Approving Official

5/29/91
Date

HRS GROUND WATER ROUTE SCORE

CATEGORY/FACTOR	RAW DATA	GEN. VALUE	SCORE
1. OBSERVED RELEASE	NO	0	0
2. ROUTE CHARACTERISTICS			
DEPTH TO WATER TABLE	33 FEET		
DEPTH TO BOTTOM OF WASTE	6 FEET		
DEPTH TO AQUIFER OF CONCERN	29 FEET	2	4
PRECIPITATION	30.0 INCHES		
EVAPORATION	44.0 INCHES		
NET PRECIPITATION	6.0 INCHES	2	2
PERMEABILITY	1.0×10^{-4} CM/SEC	2	2
PHYSICAL STATE		2	3
TOTAL ROUTE CHARACTERISTICS SCORE:			11
3. CONTAINMENT		3	3
4. WASTE CHARACTERISTICS			
TOXICITY/PERSISTENCE: CHROMIUM, HEXAVALENT (Cr +6)			18
WASTE QUANTITY			
CUBIC YDS	0		
DRUMS	0		
GALLONS	0		
TONS	146		
TOTAL	146 CU. YDS	4	4
TOTAL WASTE CHARACTERISTICS SCORE:			22
5. TARGETS			
GROUND WATER USE		1	3
DISTANCE TO NEAREST WELL	5230 FEET		
AND	MATRIX VALUE	8	8
TOTAL POPULATION SERVED	74 PERSONS		
NUMBER OF HOUSES	20		
NUMBER OF PERSONS	0		
NUMBER OF CONNECTIONS	0		
NUMBER OF IRRIGATED ACRES	0		
TOTAL TARGETS SCORE:			11
GROUND WATER ROUTE SCORE (SCOR) = 13.93			

HRS SURFACE WATER ROUTE SCORE

CATEGORY/FACTOR	RAW DATA	ASN. VALUE	SCORE
1. OBSERVED RELEASE	NO	0	0
2. ROUTE CHARACTERISTICS			
SITE LOCATED IN SURFACE WATER	NO		
SITE WITHIN CLOSED BASIN	NO		
FACILITY SLOPE	0.2 %		
INTERVENING SLOPE	0.4 %	0	0
24-HOUR RAINFALL	3.3 INCHES	3	3
DISTANCE TO DOWN-SLOPE WATER	5280 FEET	1	2
PHYSICAL STATE	3		3
TOTAL ROUTE CHARACTERISTICS SCORE:			8
3. CONTAINMENT	3		3
4. WASTE CHARACTERISTICS			
TOXICITY/PERSISTENCE:CHROMIUM,HEXAVALENT(Cr +6)			18
WASTE QUANTITY CUBIC YDS	0		
DRUMS	0		
GALLONS	0		
TONS	146		
TOTAL	146 CU. YDS	4	4
TOTAL WASTE CHARACTERISTICS SCORE:			22
5. TARGETS			
SURFACE WATER USE		2	6
DISTANCE TO SENSITIVE ENVIRONMENTS		0	0
COASTAL WETLANDS	NONE		
FRESH-WATER WETLANDS	18000 FEET		
CRITICAL HABITAT	NONE		
DISTANCE TO STATIC WATER	> 3 MILES		
DISTANCE TO WATER SUPPLY INTAKE	> 3 MILES		
AND MATRIX VALUE		0	0
TOTAL POPULATION SERVED	0		
NUMBER OF HOUSES	0		
NUMBER OF PERSONS	0		
NUMBER OF CONNECTIONS	0		
NUMBER OF IRRIGATED ACRES	0		
TOTAL TARGETS SCORE:			6
SURFACE WATER ROUTE SCORE (S _{SW}) = 4.92			

HRS AIR ROUTE SCORE

<u>CATEGORY/FACTOR</u>	<u>RAW DATA</u>	<u>ASN. VALUE</u>	<u>SCORE</u>
1. OBSERVED RELEASE	NO	0	0

2. WASTE CHARACTERISTICS

REACTIVITY:

INCOMPATIBILITY

TOXICITY

WASTE QUANTITY CUBIC YARDS
 DRUMS
 GALLONS
 TONS

TOTAL

MATRIX VALUE

TOTAL WASTE CHARACTERISTICS SCORE:

N/A

3. TARGETS

POPULATION WITHIN 4-MILE RADIUS

0 to 0.25 mile

0 to 0.50 mile

0 to 1.0 mile

0 to 4.0 miles

DISTANCE TO SENSITIVE ENVIRONMENTS

COASTAL WETLANDS

FRESH-WATER WETLANDS

CRITICAL HABITAT

DISTANCE TO LAND USES

COMMERCIAL/INDUSTRIAL

PARK/FOREST/RESIDENTIAL

AGRICULTURAL LAND

PRIME FARMLAND

HISTORIC SITE WITHIN VIEW?

TOTAL TARGETS SCORE:

N/A

AIR ROUTE SCORE (Sa) = 0.00

HAZARD RANKING SYSTEM SCORING CALCULATIONS
FOR
SITE: OWENS-ILLINOIS, INC PLANT 10
AS OF 05/12/89

PAGE 5

GROUND WATER ROUTE SCORE

ROUTE CHARACTERISTICS		11
CONTAINMENT	X	3
WASTE CHARACTERISTICS	X	22
TARGETS	X	11

$$= 7986 / 57,330 \times 100 = 13.93 = S_{gw}$$

SURFACE WATER ROUTE SCORE

ROUTE CHARACTERISTICS		8
CONTAINMENT	X	3
WASTE CHARACTERISTICS	X	22
TARGETS	X	6

$$= 3168 / 64,350 \times 100 = 4.92 = S_{sw}$$

AIR ROUTE SCORE

$$\text{OBSERVED RELEASE} \quad 0 / 35,100 \times 100 = 0.00 = S_{air}$$

SUMMARY OF MIGRATION SCORE CALCULATIONS

	<u>S</u>	<u>S²</u>
GROUND WATER ROUTE SCORE (S_{gw})	13.93	194.04
SURFACE WATER ROUTE SCORE (S_{sw})	4.92	24.21
AIR ROUTE SCORE (S_{air})	0.00	0.00
$S_{gw}^2 + S_{sw}^2 + S_{air}^2$		218.25
$\sqrt{S_{gw}^2 + S_{sw}^2 + S_{air}^2}$		14.77
$S_M = \sqrt{S_{gw}^2 + S_{sw}^2 + S_{air}^2} / 1.73$		8.54



POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION SITE NUMBER (to be assigned by HQ)

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME OWENS - ILLINOIS, INC/PLT 10		B. STREET (or other identifier) 3107 SYLVAN RD	
C. CITY ATLANTA	D. STATE GA.	E. ZIP CODE 30354	F. COUNTY NAME FULTON
G. OWNER/OPERATOR (if known) 1. NAME MANUS, G. C.		2. TELEPHONE NUMBER 404 766-2761	
H. TYPE OF OWNERSHIP <input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input checked="" type="checkbox"/> 5. PRIVATE <input type="checkbox"/> 6. UNKNOWN			
I. SITE DESCRIPTION LANDFILL			
J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.) 103 C NOTIFICATION			K. DATE IDENTIFIED (mo., day, & yr.) 6-8-81
L. PRINCIPAL STATE CONTACT 1. NAME MOSES N. McCALL III		2. TELEPHONE NUMBER 404-656-2833	

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM <input type="checkbox"/> 1. HIGH <input type="checkbox"/> 2. MEDIUM <input type="checkbox"/> 3. LOW <input type="checkbox"/> 4. NONE <input checked="" type="checkbox"/> 5. UNKNOWN	
B. RECOMMENDATION <input type="checkbox"/> 1. NO ACTION NEEDED (no hazard) <input checked="" type="checkbox"/> 2. SITE INSPECTION NEEDED a. TENTATIVELY SCHEDULED FOR: 1983 b. WILL BE PERFORMED BY: EPD <input type="checkbox"/> 3. IMMEDIATE SITE INSPECTION NEEDED a. TENTATIVELY SCHEDULED FOR: b. WILL BE PERFORMED BY: <input type="checkbox"/> 4. SITE INSPECTION NEEDED (low priority)	

C. PREPARER INFORMATION 1. NAME JIM USSELY	2. TELEPHONE NUMBER 404 656-2833	3. DATE (mo., day, & yr.) 7-14-82
--	-------------------------------------	--------------------------------------

III. SITE INFORMATION

A. SITE STATUS <input type="checkbox"/> 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.) <input checked="" type="checkbox"/> 2. INACTIVE (Those sites which no longer receive wastes.) <input type="checkbox"/> 3. OTHER (specify): (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)	
B. IS GENERATOR ON SITE? <input type="checkbox"/> 1. NO <input type="checkbox"/> 2. YES (specify generator's four-digit SIC Code):	
C. AREA OF SITE (in acres) UNKNOWN	D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES 1. LATITUDE (deg.-min.-sec.) 2. LONGITUDE (deg.-min.-sec.)
E. ARE THERE BUILDINGS ON THE SITE? <input type="checkbox"/> 1. NO <input type="checkbox"/> 2. YES (specify):	

CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

X' A. TRANSPORTER	X' B. STORER	X' C. TREATER	X' D. DISPOSER
1. RAIL	1. PILE	1. FILTRATION	X 1. LANDFILL
2. SHIP	2. SURFACE IMPOUNDMENT	2. INCINERATION	2. LANDFARM
3. BARGE	3. DRUMS	3. VOLUME REDUCTION	3. OPEN DUMP
4. TRUCK	4. TANK, ABOVE GROUND	4. RECYCLING/RECOVERY	4. SURFACE IMPOUNDMENT
5. PIPELINE	5. TANK, BELOW GROUND	5. CHEM./PHYS. TREATMENT	5. MIDNIGHT DUMPING
6. OTHER (specify):	6. OTHER (specify):	6. BIOLOGICAL TREATMENT	6. INCINERATION
		7. WASTE OIL REPROCESSING	7. UNDERGROUND INJECTION
		8. SOLVENT RECOVERY	8. OTHER (specify):
		9. OTHER (specify):	

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

V. WASTE RELATED INFORMATION

A. WASTE TYPE

☒ 1. UNKNOWN ☒ 2. LIQUID ☒ 3. SOLID ☒ 4. SLUDGE ☐ 5. GAS

B. WASTE CHARACTERISTICS

☒ 1. UNKNOWN ☐ 2. CORROSIVE ☐ 3. IGNITABLE ☐ 4. RADIOACTIVE ☐ 5. HIGHLY VOLATILE
☒ 6. TOXIC ☐ 7. REACTIVE ☐ 8. INERT ☐ 9. FLAMMABLE

☐ 10. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

No

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
X' (1) PAINT, PIGMENTS	X' (1) OILY WASTES	X' (1) HALOGENATED SOLVENTS	X' (1) ACIDS	X' (1) FLYASH	X' (1) LABORATORY PHARMACEUT.
(2) METALS SLUDGES	(2) OTHER (specify):	(2) NON-HALOGENATED SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (specify):	(3) CAUSTICS	(3) MILLING/ MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMLTG. WASTES	(4) MUNICIPAL
(5) OTHER (specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (specify):
			(6) CYANIDE	(6) OTHER (specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			X (10) METALS		
			(11) OTHER (specify):		
			CHROMIUM		

V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

CHROMIUM

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

NONE

VI. HAZARD DESCRIPTION

	A. TYPE OF HAZARD	B. POTENTIAL HAZARD (mark 'X')	C. ALLEGED INCIDENT (mark 'X')	D. DATE OF INCIDENT (mo., day, yr.)	E. REMARKS
A	1. NO HAZARD				
B	2. HUMAN HEALTH				
C	3. NON-WORKER INJURY/EXPOSURE				
D	4. WORKER INJURY				
E	5. CONTAMINATION OF WATER SUPPLY				
F	6. CONTAMINATION OF FOOD CHAIN				
G	7. CONTAMINATION OF GROUND WATER	X			
H	8. CONTAMINATION OF SURFACE WATER	X			
I	9. DAMAGE TO FLORA/FAUNA				
J	10. FISH KILL				
K	11. CONTAMINATION OF AIR				
L	12. NOTICEABLE ODORS				
M	13. CONTAMINATION OF SOIL	X			
N	14. PROPERTY DAMAGE				
O	15. FIRE OR EXPLOSION				
P	16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS				
Q	17. SEWER, STORM DRAIN PROBLEMS				
R	18. EROSION PROBLEMS				
S	19. INADEQUATE SECURITY				
T	20. INCOMPATIBLE WASTES				
U	21. MIDNIGHT DUMPING				
V	22. OTHER (specify):				

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- ☐ 1. NPDES PERMIT ☐ 2. SPCC PLAN ☐ 3. STATE PERMIT (specify): _____
☐ 4. AIR PERMITS ☐ 5. LOCAL PERMIT ☐ 6. RCRA TRANSPORTER
☐ 7. RCRA STORER ☐ 8. RCRA TREATER ☐ 9. RCRA DISPOSER
☒ 10. OTHER (specify): NONE

B. IN COMPLIANCE?

- ☐ 1. YES ☐ 2. NO ☒ 3. UNKNOWN

4. WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

- ☒ A. NONE ☐ B. YES (summarize below)

IX. INSPECTION ACTIVITY (past or on-going)

- ☒ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION

X. REMEDIAL ACTIVITY (past or on-going)

- ☒ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.



POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION SITE NUMBER (to be assigned by HQ)

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency (EN-335), 401 M St., SW, Washington, DC 20460.

GAD003295243 FULTON
OWENS-ILLINOIS, INC/PLANT 10
3107 SYLVAN RD
ATLANTA GA 30354
MANUS, G. C., PURCHASING* 4047602761

LOCATION

ET (or other identifier)

E. ZIP CODE F. COUNTY NAME

G. TELEPHONE NUMBER

H. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☐ 5. PRIVATE ☐ 6. UNKNOWN

"103-C NOTIFICATION" DATE: 810608
JIM SEIZER
PHONE: 404-656-2833

K. DATE IDENTIFIED
(mo., day, & yr.)

L. TELEPHONE NUMBER

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☒ 3. LOW ☐ 4. NONE ☒ 5. UNKNOWN

B. RECOMMENDATION

☐ 1. NO ACTION NEEDED (no hazard)

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

☒ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

b. WILL BE PERFORMED BY:

b. WILL BE PERFORMED BY:

☐ 4. SITE INSPECTION NEEDED (low priority)

C. PREPARER INFORMATION

1. NAME

2. TELEPHONE NUMBER

3. DATE (mo., day, & yr.)

III. SITE INFORMATION

A. SITE STATUS

☐ 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)

☐ 2. INACTIVE (Those sites which no longer receive wastes.)

☐ 3. OTHER (specify):
(Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

B. IS GENERATOR ON SITE?

☐ 1. NO

☐ 2. YES (specify generator's four-digit SIC Code):

C. AREA OF SITE (in acres)

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (deg., min., sec.)

2. LONGITUDE (deg., min., sec.)

E. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO

☐ 2. YES (specify):

IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

X	A. TRANSPORTER	X	B. STORER	X	C. TREATER	X	D. DISPOSER
	1. RAIL		1. PILE		1. FILTRATION		1. LANDFILL
	2. SHIP		2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE		3. DRUMS		3. VOLUME REDUCTION		3. OPEN DUMP
	4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY		4. SURFACE IMPOUNDMENT
	5. PIPELINE		5. TANK, BELOW GROUND		5. CHEM./PHYS. TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER (specify):		6. OTHER (specify):		6. BIOLOGICAL TREATMENT		6. INCINERATION
					7. WASTE OIL REPROCESSING		7. UNDERGROUND INJECTION
					8. SOLVENT RECOVERY		8. OTHER (specify):
					9. OTHER (specify):		

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

V. WASTE RELATED INFORMATION

A. WASTE TYPE

☐ 1 UNKNOWN ☐ 2 LIQUID ☐ 3 SOLID ☐ 4 SLUDGE ☐ 5 GAS

B. WASTE CHARACTERISTICS

☐ 1 UNKNOWN ☐ 2 CORROSIVE ☐ 3 IGNITABLE ☐ 4 RADIOACTIVE ☐ 5 HIGHLY VOLATILE
☐ 6 TOXIC ☐ 7 REACTIVE ☐ 8 INERT ☐ 9 FLAMMABLE
☐ 10. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

2. Estimate the amount (specify unit of measure) of waste by category, mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
X (1) PAINT, PIGMENTS	X (1) OILY WASTES	X (1) HALOGENATED SOLVENTS	X (1) ACIDS	X (1) FLYASH	X (1) LABORATORY PHARMACEUT.
(2) METALS SLUDGES	(2) OTHER (specify):	(2) NON-HALOGENATED SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (specify):	(3) CAUSTICS	(3) MILLING/ MIN. TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMELTG. WASTES	(4) MUNICIPAL
(5) OTHER (specify):			(5) DYES/INKS	(5) NON-FERROUS SMELTG. WASTES	(5) OTHER (specify):
			(6) CYANIDE	(6) OTHER (specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			(11) OTHER (specify):		

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

GAS000 001027

Zip Code 30354

Zip Code **30354**

Phone 404-766-2761 X154

From (Year) **1962** To (Year) **1980**

EPA Form 8900-1

Notification of Hazardous Waste Site

Side Two

Waste Quantity:

Place an X in the appropriate boxes to indicate the facility types found at the site.

In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.

In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.

Facility Type

1. ☐ Piles
2. ☐ Land Treatment
3. ☒ Landfill
4. ☐ Tanks
5. ☐ Impoundment
6. ☐ Underground Injection
7. ☐ Drums, Above Ground
8. ☐ Drums, Below Ground
9. ☐ Other (Specify) _____

Total Facility Waste Amount

cubic feet < 1,000

gallons _____

Total Facility Area

square feet Indeterminable at this

acres _____

time.

G Known, Suspected or Likely Releases to the Environment:

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

☐ Known ☐ Suspected ☐ Likely ☒ None Known*

Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

H Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

I Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

*To the best of our knowledge we are unaware of any releases of waste from the site.

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

Name

D. W. Leidy

Street

3107 Sylvan Road

City

Atlanta

State Ga

Zip Code

30354

Signature

Date

6/5/81

- ☒ Owner, Present
☐ Owner, Past
☐ Transporter
☐ Operator, Present
☐ Operator, Past
☐ Other

Ken: Pls review file on this site & call in the information to Leonard Nelms (see card).

Kumar

Owens-Illinois Inc. Plant 10 GA003295243
Fulton Co.



WESTON-ATC, Inc.

1635 Pumphrey Avenue • Auburn, AL 36830 • 205-826-1700

Leonard Nelms, CIH
Project Manager

A subsidiary of Roy F. Weston, Inc.



2/17/84

Called Nelms and told him that site had been assigned and had not yet been scheduled

- K Kumar

DATE: 09/24/91

AFS COMPLIANCE SOURCE DATA REPORT

PGM: AFP627
PAGE: 1

PLANT: 00020 - OWENS-BROCKWAY GLASS
STATE: GA/13 CITY: - ATLANTA
COUNTY: 121 - FULTON CO AQCR: 056

GOV'T FACILITY CODE: 0 - ALL OTHER FACILITIES NOT OWNED OR OPER.
AIR-PROGRAM CODE(S): 0
OPERATING STATUS : 0 - OPERATING

PLANT NAME: OWENS-BROCKWAY GLASS
ADDRESS : 3107 SYLVAN RD
CITY,STATE: ATLANTA,GA 30354

LAST PLANT UPDATE : 91/09/11
REGIONAL PLANNING : D
LOCAL CONTROL REGN: 61
INSPECTOR : G61 - S BUCKLES
MONITORING INFORMATION:
SOURCE: AMBIENT:

DUNN & BRADSTREET:
EPA ID NUMBER : GAD984281865

STANDARD INDUSTRIAL CLASSIFICATIONS:
3221 - GLASS CONTAINERS
3221 - GLASS CONTAINERS
3221 - GLASS CONTAINERS

MAILING ADDRESS:
NAME :
ADDRESS :
CITY,STATE:

SIGNIFICANT VIOLATOR FLAGS:

COMPLIANCE : 3 - IN COMPLIANCE - INSPECTIO : -
CLASSIFICATION: A1
LAST INSPECT. : 90/10/05 TYPE: 27 : / / TYPE:

OPERATING STATUS: 0 - OPERATING
STATE REGISTRATION: S BUCKLES
PLANT DESCRIPTION: GLASS MFG

GOVT FAC.: 0 - ALL OTHER FACILITIES NOT
CAPACITY: 0
COMPLIANCE CONTACT :
PRIORITY : -
CEMSS INFO (Y/N):

AIR PROGRAM CODES:

0 - SIP 0 - OPERATING
INSPECTION FREQUENCY/YEAR: 1/91
REPEAT VIOLATION FLAG/DATE:
TURNOVER COMPLIANCE FLAG: 0
REPORTING TO REGION: -
STAFF: G61 - S BUCKLES

COMPLIANCE : 3 - IN COMPLIANCE - INSPECTIO : -
CLASSIFICATION: A1
RDE1: H RDE2: RDE3: D RDE4: RDE5: RDE6: RDE15: 2
RDE7: 3 RDE9: RDE10: RDE11: RDE12:
STATE IMPLEMENTATION PLAN: -

COMPLIANCE HISTORY:

MONTHLY:

STATE: (YY/MM)

1: 3 91/09	2: 3 91/08	3: 3 91/07	4: 3 91/06	5: 3 91/05	6: 3 91/04	7: 3 91/03	8: 3 91/02
9: 3 91/01	10: 3 90/12	11: 3 90/11	12: 0 90/10	13: 3 90/04	14: 3 90/03	15: 3 90/02	16: 3 90/01
17: 3 89/12	18: 3 89/11	19: 3 89/10	20: 3 89/09	21: 3 89/08	22: 3 89/07	23: 3 89/06	24: 3 89/05
EPA: (YY/MM)							
1: 91/09	2: 91/08	3: 91/07	4: 91/06	5: 91/05	6: 91/04	7: 91/03	8: 91/02

DATE: 09/24/91

AFS COMPLIANCE SOURCE DATA REPORT

PGM: AFP627
PAGE: 2PLANT: 00020 - OWENS-BROCKWAY GLASS
STATE: GA/13 CITY: - ATLANTA
COUNTY: 121 - FULTON CO AQCR: 056GOV'T FACILITY CODE: 0 - ALL OTHER FACILITIES NOT OWNED OR OPER.
AIR-PROGRAM CODE(S): 0
OPERATING STATUS : 0 - OPERATING

9: 91/01	10: 90/12	11: 90/11	12: 90/10	13: 90/04	14: 90/03	15: 90/02	16: 90/01
17: 89/12	18: 89/11	19: 89/10	20: 89/09	21: 89/08	22: 89/07	23: 89/06	24: 89/05
QUARTERLY:							
STATE: (YY/QQ)							
1: 3 91/03	2: 3 91/02	3: 3 91/01	4: 3 90/04	5: 3 90/02	6: 3 90/01	7: 3 89/04	8: 3 89/03
EPA: (YY/QQ)							
1: 91/03	2: 91/02	3: 91/01	4: 90/04	5: 90/02	6: 90/01	7: 89/04	8: 89/03

AIR PROGRAM POLLUTANTS:

CO - CARBON MONOXIDE
630080
LOADING: A - ACTUAL OR ESTIMATED ACTUA
RDE14 :
TOXICITY LEVEL:-----STATE-----
COMPLIANCE : 3 - IN COMPLIANCE - INSPECTIO : -
CLASSIFICATION: UK
ATTAIN/NONATTN: N - NON-ATTAINMENT FOR PRIMAR : -

-----EPA-----

NO2 - NITROGEN DIOXIDE
10102440
LOADING: A - ACTUAL OR ESTIMATED ACTUA
RDE14 : 0
TOXICITY LEVEL:-----STATE-----
COMPLIANCE : 3 - IN COMPLIANCE - INSPECTIO : -
CLASSIFICATION: UK
ATTAIN/NONATTN: A - ATTAINMENT AREA FOR A GIV : -

-----EPA-----

PT - TOTAL PARTICULATE MATTER
LOADING: A - ACTUAL OR ESTIMATED ACTUA
RDE14 : 0
TOXICITY LEVEL:-----STATE-----
COMPLIANCE : 3 - IN COMPLIANCE - INSPECTIO : -
CLASSIFICATION: UK
ATTAIN/NONATTN: A - ATTAINMENT AREA FOR A GIV : -

-----EPA-----

PX - POLLUTANT X
LOADING: A - ACTUAL OR ESTIMATED ACTUA
RDE14 : 0
TOXICITY LEVEL:-----STATE-----
COMPLIANCE : 3 - IN COMPLIANCE - INSPECTIO : -
CLASSIFICATION: A1
ATTAIN/NONATTN: A - ATTAINMENT AREA FOR A GIV : -

-----EPA-----

SO2 - SULFUR DIOXIDE
7446095
LOADING: A - ACTUAL OR ESTIMATED ACTUA
RDE14 : 0
TOXICITY LEVEL:-----STATE-----
COMPLIANCE : 3 - IN COMPLIANCE - INSPECTIO : -
CLASSIFICATION: UK
ATTAIN/NONATTN: A - ATTAINMENT AREA FOR A GIV : -

-----EPA-----

VOC - VOLATILE ORGANIC COMPOUND

-----STATE-----
-----EPA-----

DATE: 09/24/91

AFS COMPLIANCE SOURCE DATA REPORT

PGM: AFP627
PAGE: 3PLANT: 00020 - OWENS-BROCKWAY GLASS
STATE: GA/13 CITY: - ATLANTA
COUNTY: 121 - FULTON CO AQCR: 056GOV'T FACILITY CODE: 0 - ALL OTHER FACILITIES NOT OWNED OR OPER.
AIR-PROGRAM CODE(S): 0
OPERATING STATUS : 0 - OPERATINGLOADING: A - ACTUAL OR ESTIMATED ACTUA
RDE14 : 0
TOXICITY LEVEL:COMPLIANCE : 3 - IN COMPLIANCE - INSPECTIO : -
CLASSIFICATION: B :
ATTAIN/NONATTN: N - NON-ATTAINMENT FOR PRIMAR : -

ACTION NO.	INDIRECT NO.	AIR PGM	TYPE/DESCRIPTION	DATE SCHEDULED	DATE ACHIEVED	ACTION CATEG.	STAFF	RESULTS	PENALTY	RD8	PLLT/CASN	ASBESTOS STTE/CONTRACTR
001	00020	0	A6 INSPECT REP COM	79/12/19	/ /		A48		0			
027	00020	0	35 PERMIT AMEND	/ /	85/10/21				0			
028	00020	0	35 PERMIT AMEND	/ /	85/11/13		G87	97 APPROVED	0			
029	00020	0	35 PERMIT AMEND	/ /	86/01/29		G59	01 ACTION ACHIEVED	0			
030	00020	0	35 PERMIT AMEND	/ /	86/04/01		G59	01 ACTION ACHIEVED	0			
031	00020	0	27 ST COMPL INSPT	/ /	86/08/14		G59	01 ACTION ACHIEVED	0			
032	00020	0	35 PERMIT AMEND	/ /	86/07/31		G59	01 ACTION ACHIEVED	0			
033	00020	0	35 PERMIT AMEND	/ /	87/01/21		G59	01 ACTION ACHIEVED	0			
034	00020	0	35 PERMIT AMEND	/ /	87/03/30		G87	01 ACTION ACHIEVED	0			
035	00020	0	27 ST COMPL INSPT	/ /	87/07/21		G59	01 ACTION ACHIEVED	0			
036	00020	0	27 ST COMPL INSPT	/ /	88/04/11		G61	21 COMPLIANCE	0			
037	00020	0	27 ST COMPL INSPT	/ /	89/04/21		G61	21 COMPLIANCE	0			
038	00020	0	27 ST COMPL INSPT	/ /	89/10/23		G61	21 COMPLIANCE	0			
039	00020	0	33 ST PER ISSUED	/ /	90/08/06		G61	01 ACTION ACHIEVED	0			
040	00020	0	27 ST COMPL INSPT	/ /	90/10/05		G61	21 COMPLIANCE	0			
041	00020	0	35 PERMIT AMEND	/ /	91/01/18		G61	01 ACTION ACHIEVED	0			
042	00020	0	59 STTE EVAL TEST	91/02/13	91/05/06		GM3	01 ACTION ACHIEVED	0			

STACK INFORMATION: 001 -

STACK INFORMATION: 002 -

STACK INFORMATION: 003 -

STACK INFORMATION: 004 -

STACK INFORMATION: 005 -

STACK INFORMATION: 006 -

DATE: 09/24/91

AFS COMPLIANCE SOURCE DATA REPORT

PGM: AFP627
PAGE: 4

PLANT: 00020 - OWENS-BROCKWAY GLASS
STATE: GA/13 CITY: - ATLANTA
COUNTY: 121 - FULTON CO AQCR: 056

GOV'T FACILITY CODE: 0 - ALL OTHER FACILITIES NOT OWNED OR OPER.
AIR-PROGRAM CODE(S): 0
OPERATING STATUS : 0 - OPERATING

STACK INFORMATION: 007 -

STACK INFORMATION: 008 -

STACK INFORMATION: 009 -

STACK INFORMATION: 010 -

STACK INFORMATION: 011 -

STACK INFORMATION: 012 -

POINT INFORMATION: 00020 / 001 C - E FURNACE

00020 DESIGN CAPACITY: 0 UNITS: - LAST INSPECT. : / / STATE TYPE: / / EPA TYPE:
CONTINUOUS EMISSIONS (Y/N): N SOOT BLOWING : / /
REGULATED SOURCE CLASS CODE: 305014 TIMES PER DAY : 0 TIMES PER WEEK: 0 AM OR PM:
OPERATING RESTRICTIONS:

AIR PROGRAM: 0 - SIP O - OPERATING
POLLUTANT-CODE: PT COMPLIANCE STATUS: 1 - IN VIOLATION - NO SCHEDUL : - EPA
STATE-IMPLEMENTATION-PLAN: - RDE7: 1 RDE15: 0

QUARTERLY: (YY/QQ)

STATE:	1: 1 91/03	2: 1 91/02	3: 1 91/01	4: 1 90/04	5: 1 90/02	6: 1 90/01	7: 1 89/04	8: 1 89/03
EPA:	1: 91/03	2: 91/02	3: 91/01	4: 90/04	5: 90/02	6: 90/01	7: 89/04	8: 89/03

POLLUTANT	STATE REGULATION	ALLOWABLE UNITS	POT UCNTL UNITS	POT CNTRL UNITS	ACTUAL UNCTRL UNITS/METHOD
PT	391-3-1 E				

DATE: 09/24/91

AFS COMPLIANCE SOURCE DATA REPORT

PGM: AFP627
PAGE: 5

PLANT: 00020 - OWENS-BROCKWAY GLASS
STATE: GA/13 CITY: - ATLANTA
COUNTY: 121 - FULTON CO AQCR: 056

GOV'T FACILITY CODE: 0 - ALL OTHER FACILITIES NOT OWNED OR OPER.
AIR-PROGRAM CODE(S): 0
OPERATING STATUS : 0 - OPERATING

POINT INFORMATION: 00020 / 002 C - BATCH SURGE HOPPER

00020 DESIGN CAPACITY: 0 UNITS: - LAST INSPECT. : / / STATE: TYPE: EPA: TYPE:
CONTINUOUS EMISSIONS (Y/N): N SOOT BLOWING : / /
REGULATED SOURCE CLASS CODE: 305014 TIMES PER DAY : 0 TIMES PER WEEK: 0 AM OR PM:
OPERATING RESTRICTIONS:

AIR PROGRAM: 0 - SIP O - OPERATING
POLLUTANT-CODE: PT COMPLIANCE STATUS: 1 - IN VIOLATION - NO SCHEDULE : - EPA:
STATE-IMPLEMENTATION-PLAN: - RDE7: 1 RDE15: 0

QUARTERLY: (YY/QQ)

STATE:
1: 1 91/03 2: 1 91/02 3: 1 91/01 4: 1 90/04 5: 1 90/02 6: 1 90/01 7: 1 89/04 8: 1 89/03
EPA:
1: 91/03 2: 91/02 3: 91/01 4: 90/04 5: 90/02 6: 90/01 7: 89/04 8: 89/03

POLLUTANT	STATE REGULATION	ALLOWABLE UNITS	POT UCNTL UNITS	POT CNTRL UNITS	ACTUAL UNCTRL UNITS/METHOD
PT	391-3-1 E				